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ORIGINAL ARTICLES

SOLIDIFIED CARBON DIOXID AS A TOPICAL AGENT.*

By Joseph Grindon, M. D., St. Louis, Mo.

The local use of liquid air for the removal of pigmentary and vascular blemishes and small growths from the skin was demonstrated by Dr. Chas. T. Dade, of New York, before the American Dermatological Association in December of 1905. Dr. Trimble, of the same city, had also experimented with this agent. Dr. Henry H. Whitehouse[1] reported a number of cases treated in this manner, before the American Medical Association in June, 1907, and in September of the same year Dr. Dade again demonstrated the method before the Sixth International Dermatological Congress at New York. While all present were much impressed with the simplicity, relative painlessness and efficacy of the procedure, they at the same time realized the difficulties in the way of its general adoption. Liquid air for use in this country must be shipped from New York in open "Dewar bulbs," evaporating all the way, and although there may be plenty left when it reaches its destination, a few days later all will have disappeared. This makes its use too troublesome and expensive away from the city where it is made.

These considerations led Dr. W. A. Pusey, of Chicago, to seek for a substitute, which he found, although of lower efficiency, in solidified carbon dioxid.[2] Liquid carbon dioxid is easily obtainable everywhere at a low cost. It is furnished in "drums" by the manufacturers who supply it for soda fountains and beer saloons. These "drums" are closed by a

*Read in the Medical Section Fifty-second Annual Meeting, Missouri State Medical Association, Jefferson City, May, 1909.

[1]J'l A. M. A., August 3, 1907.

[2]See discussion of Dr. Whitehouse's paper, loc cit., also J'l A. M. A.

valve, so that the amount needed can be easily withdrawn and the remainder preserved for months. A 20-lb. drum, the size most convenient for physicians will furnish enough for a number of applications, making each application cost about 25 cents. On opening the valve and thus suddenly reducing the pressure, the liquid rapidly volatilizes, and rushes forth as a gas mixed with minute spherules of the liquid, looking just like escaping steam. So much heat is thereby rendered latent that the gas, when properly collected, as detailed below, immediately recondenses into a powdery solid presenting the exact appearance of snow.

The method devised by Pusey and since used by myself and others is as follows: The drum is laid horizontally across a chair or other convenient support, and a chamois skin folded so as to form a bag held over the vent. This end of the drum is then lowered so that the gas which fills that part of the drum not occupied by liquid may rise to the other end, leaving only liquid next the valve. The valve is then opened and gas allowed to escape into the chamois skin for a few seconds, where it at once condenses into snow. This may be made into a snowball and then cut down with a knife into the shape desired, or packed into a mold, such as a short section of hard-rubber tubing, from which it may be pushed out with the blunt end of a lead-pencil. The little mass can be held in a small piece of chamois skin to protect the fingers of the operator. On lifting it off the surface, we find a snow-white frozen area of stony hardness, which thaws out in about twice the time occupied in making the application. This is accompanied by a stinging sensation slightly more acute than that of the freezing itself. A wheal soon develops which, after some hours, is replaced by a bleb, later drying down into a crust. The duration and tenseness of the blister, the thickness and adhesion of the crust, and the final result, vary with the length of the application and the pressure employed. The latter one learns to gauge by practice. As to time, with pressure sufficient to fix the freezing agent to the skin, an application of from 5 to 10 seconds will excite a therapeutic degree of inflammation such as may be useful in lupus erythematosus. Where superficial destruction and scarring are desired, as in port-wine marks, 20 or 30 seconds are required, although I have sometimes in such cases cautiously advanced to contacts lasting 40 to 45 seconds. For deep destruction of small areas, single longer applications are occasionally necessary.

I believe that solid carbon dioxid—freezing at —90 C.—is inferior for most purposes to liquid air, which has a temperature of —180 C., or twice as cold. I question whether the former would often be employed if the latter were everywhere available; but, under existing circumstances, carbon dioxid has a field of undoubted usefulness in lupus erythematosus, flat angiomata, small cavernous angiomata, pigmented naevi, warts, senile keratoses and small superficial epitheliomata. In extensive flat angioma, repeated applications, separated by intervals of two weeks, are advisable; so that the treatment as a whole may extend over a year or

more. Still, in view of the unsatisfactory results of other forms of treatment, it is well worth the time and trouble. In dark-bluish, raised, warty, cavernous naevi, unless quite small, the treatment has so far in my hands proved a failure, and this I say with full knowledge of the successes claimed by certain reporters. In such cases the injecting of water at a boiling temperature gives the best results. In flat naevi, however, the results are good, although it may sometimes be necessary to work several times over the same surface. It is better to be satisfied with a moderate degree of blanching after each application, and thus to avoid the risk of unsightly scarring.

The best technic in flat naevi consists in preparing a small cube or square rod, measuring 1-3 to ½ inch in each diameter, with which we freeze 3 to 5 squares at a sitting, arranged checker-board fashion. At the next sitting we treat the squares left between the first series. Otherwise there would be overlapping of margins which would be overtreated, while areas between would remain undertreated.

While results have not always been brilliant, they have generally been satisfactory. I can safely say that the method is simpler, easier of application, and, in properly selected cases, gives better results than any other with which I am acquainted, excepting only that by liquid air.

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DISCUSSION.

Dr. Geo. W. Goins, Breckenridge: This method is so new that not many of us have put it to a practical test, so that it is difficult to discuss it.

Dr. Grindon, in closing: I have nothing to add but that this is so cheap and easy that I would advise you to try it.

THREE more roads have established deathless records. For the fiscal year ending June 30 last the Northwestern carried 27,000,000 people without a single fatality to a passenger. During the same period the Santa Fe carried 12,605,697 passengers safely over an average of 9,794 miles of road operated.

This remarkable record was also attained by the Rock Island system, which company carried a total of 18,743,022 passengers during the fiscal year ending June 30, 1909, without a fatality. The Rock Island runs trains in twelve different states, and its numerous passenger trains last year made a total of 16,411,550 passenger miles. The record of the Rock Island is more remarkable than some of the others by reason of the fact that much of its train operation is through comparatively new country in which railroad construction is not of the high grade it has attained in more thickly settled portions.—*Railway Surgeon.*

OBESITY.*

By W. K. Statler, M. D., Oak Ridge, Mo.

While a certain degree of obesity is always an enviable condition, it frequently assumes undesirable proportions which cause it to become, to say the least, a source of embarrassment, and may be a great inconvenience or even bodily danger. It is then the condition becomes of interest to the physician and asserts itself as one of the many perplexing problems which he is called upon to solve.

Only occasionaly is the general practitioner consulted by individuals concerning their corpulent anatomy, but very often, while being consulted for other conditions, does he find it advisable to recommend measures for the reduction of obesity.

What obesity really is may be briefly stated as a metabolic disorder characterized by an excessive development of the body fat.

How and why this fat formation comes about has long been, and still is, a subject of considerable inquiry as well as dispute.

The subject of intermediary metabolism, termed by the celebrated physiologist Foster as "the gaps and guesses of nutrition," remains an unsolved problem, and the progress of physiological chemistry only serves to render it more complex.

We were long content with the idea that practically all metabolic activity came about by the presence of oxygen in the blood stream; and much credit is due the famous French chemist, Lavosier, for giving us this important stepping-stone in physiological science. But now we recognize the living cell as the laboratory where the chief metabolic changes occur and that oxydation, which was formerly thought to be a relatively simple chemical process, is the result of a very complex succession of intracellular chemical changes. That these intracellular chemical processes are due to ferments or enzrmes is now prominently considered.

At this time our knowledge of the fat-forming food is somewhat imperfect, due to the fact that the ideas given us by our master workers on this subject are, strange to say, very unstable, as well as conflicting.

Until about fifteen years ago, it was generally believed and taught by all physiologists that carbohydrate food was the chief source of fat formation; then the scientific mind turned and we were told that our ideas on this subject were erroneous and that the chief fat builders were not carbohydrates but proteids, and that the carbohydrates only served

*Read in the Medical Section, Fifty-second Annual Meeting, Missouri State Medical Association, Jefferson City, May, 1909.

to act in that capacity by laying themselves on the burning altar of metabolism in order that the proteids might be saved and stored as fat.

To-day we find ourselves in a quandary, for again our masters tell us that carbohydrates are unquestionably the chief builders of fat and that the proteids occupy a very inferior role, if any at all, in this process. No less authorities than Professors Chittenden and Mendel have this to say on the subject: "With reference to proteids as fat-forming elements, it is impossible to make any conclusive statement at present; the evidence is by no means convincing and there is a tendency to regard such a process as unlikely, if not impossible." Thus the trend of scientific thought; and well may be applied to physiology, as to other sciences, the saying, "The knowledge of to-day is the ignorance of tomorrow." Theoretical knowledge, however, must of necessity undergo certain evolutionary stages before great truths are born, and progress in science can only be made by playing the game fairly, regardless of the fact that popular sentiment and fixed ideas may suffer.

In the past, practically all writers on the subject of obesity have maintained that, in the fat reduction process, the nitrogenous equilibrium must be maintained by a certain given minimum standard of proteid food; but the revelations of the Sheffield Scientific School of Yale University during the past few years, under the direction of Professors Chittenden and Mendel, have in a certain sense revolutionized the subject of nutrition and dieteties. In an extensive series of experiments on individuals of different occupations they found that nitrogenous equilibrium can be maintained on fifty per cent. less proteid food than had been the minimum standard accepted by the ablest investigators for many past decades. Reasoning from the findings of these experiments, they maintain that it is probable, since the greater part of the nitrogen contained in an ordinary diet is speedily eliminated, the proteid food can satisfactorily be altogether replaced by other food-stuffs, and while there is no ground for recommending it, there is no question but that life and vigor can be maintained upon an exclusive vegetable diet.

Professor Anders, of Philadelphia, in a masterful article on the subject of obesity, says: "The source of fat is considered to be the fats and carbohydrates taken as food, although probably it is derived to a considerable extent from albuminoids. A striking illustration of an increase of adipose tissue from proteids is seen in the present day method of treating tuberculosis with milk and raw eggs." He further says that, "excessive indulgence in any one of the varieties of diet may produce the condition of obesity." This statement, in spite of conflicting opinions, is in my opinion the paramount point of interest. The condition of obesity is the result of quantity rather than of quality of food-stuffs.

Carefully considered, the evidence sums itself up to the proposition that if more calories are ingested in the form of either carbohydrates, proteids or fats, than is necessary to maintain nutritive equilibrium,

obesity will result; and if fewer calories are introduced than normally required, the fat reserve will first be called upon to make up the deficit.

Considering the subject in all its aspects, while it must be admitted that heredity, temperament, occupation, age, sex, etc., play minor rôles in its causation, the fact remains that the chief cause of obesity is the prevalent world-wide sin of over-eating. To observe this habit of over-eating, one has but to listen to the orders given the waiters and watch the other fellow eat, while patiently awaiting his own order, in our restaurants and hotels. It is indeed amazing to see what the human stomach will tolerate.

While it is a matter of common reamark, as well as the dictum of some of our ablest writers, that the large, corpulent persons are spare eaters, my observation has not substantiated this; on the other hand, I find that the large Falstaff-like individuals are habitually large eaters.

The treatment of obesity, therefore, resolves itself into the task of making a temperate person out of an intemperate one. Self mastery is a much coveted goal but the gratification of the appetite has so long been a thorn in the flesh that it is with difficulty eradicated. Perseverance, however, on the part of the patient, doctor and cook will, in the majority of instances, be rewarded by satisfactory results.

In all text-books and special monographs on the subject of obesity will be found dietaries for its treatment, but as these articles are frequently written by foreign authors the food preparations mentioned are either unknown or are out of reach of the average cook. For this reason I will mention a dietary that almost anyone can carry out and that has served me well in several instances in which the patients were reduced at the rate of about one pound daily for a period of sixty to seventy-five days, without apparently impairing the general health or causing serious inconvenience in the way of hunger, weakness or abdominal distress.

In order to be exact in the prescribing of a dietary for an individual many things must be taken into consideration, *e. g.*, age, weight, height, previous habits and general constitutional condition; but in a general way I believe this dietary will meet the demands of the average healthy, obese adult, who is not in advanced age and whose organs are functionating in a healthy condition and whose tasks impose upon himself a reasonable amount of exercise and not too strenuous labors.

The following is the dietary I have used:

BREAKFAST.

One apple or orange.
One slice of thoroughly toasted light-bread (with butter if desired).
One soft boiled egg.
One cupful of coffee without sugar.

9:30 A. M.

Eat an apple or an orange.

NOON-DAY MEAL.

One large dish of vegetable or animal soup.
One moderate-sized piece of either beef, pork or poultry.
A moderate quantity of either tomatoes, cabbage, celery, peas or beans.
A moderate dish of raw or cooked fruit, very sparingly sweetened.
One glassful of water.

3:30 P. M.

Eat an apple or an orange.

EVENING MEAL.

One soft boiled egg.
A small piece of cheese (about 1½ oz.).
One cracker or slice of light-bread.
One cupful of tea without cream or sugar.

No fluids are to be taken at meals except as indicated, and none between meals, except a glassful of water on rising in the morning and one three hours after food is taken.

The fuel value of this dietary I have estimated to be about twelve hundred calories, while the amount usually estimated necessary to maintain nutritive equilibrium is about twenty-five hundred calories.

In presenting this dietary I do not offer it as anything new. It is simply the result of a combination of those ideas given us by the men who have given this subject special study. Being a country practitioner I have arranged it so that it can be applied in a practical manner. While it has served me well in several instances I am fully aware that it will not serve all alike. It will, however, in all cases, serve to teach the lesson of temperate eating; and this alone being accomplished our advice would not be given in vain.

Professor Osler makes the extraordinary statement that over-eating is a "vice more prevalent and only a little behind over-drinking in its disastrous effects."

Some able writers suggest that living at a fairly high protein level the body is more resistant to disease and other emergencies than when the protein level is low; on the other hand, the elimination of the excess of nitrogen consequent to taking a heavy protein diet may become physiologically burdensome, if not harmful, to the extent that conditions arise much more harmful than obesity.

In closing, it may truly be said that much work remains to be done on the subject of nutrition and metabolism, but when we consider the great number of enthusiastic truth seekers in our modern laboratories we cannot help but have faith in the future solution of this intricate problem.

The value of such knowledge may well be expressed by the following words quoted from that prince of physiological chemists, Von Leyden: "The healthy and orderly conduct of our daily life is intimately associated with three important factors: nutrition, work and sleep. A

measured participation in these closely interdependent things will preserve health, prolong life and perfect the valuable habits of regularity, moderation and self control. Nutrition should, therefore, be looked upon as an important function—as a duty of man toward himself."

DISCUSSION.

Dr. Joseph Grindon, St. Louis: In one point I would not quite agree with the essayist, *i. e.*, that the chief cause of obesity lay in the total amount of food consumed. There is one thing more important, and that is the peculiar character and make-up of the tissues, whether they are fat-builders or not. You know you can take a Berkshire and a razor-back, and feed them exactly the same things and exactly the same amount, yet the razor-back will still be a razor-back, and the Berkshire a Berkshire. The work of Chittenden and the men associated with him has been of immense value in showing how little we need, to meet the wear and tear of tissue metabolism, how little tissue-proteid. I find the diet given by the doctor gives splendid results, associated with the idea of Schweninger, of cutting off the use of liquid at meals. Epstein's method is to feed fat largely, the result being that the patient will need less total food. The idea of cutting off fluids is most important. Eat all you want, dry, and with the meal have no liquid, but two hours after meals drink a glass of water. I think it works this way: the fellow gets tired of eating, and quits. I presume Cathcart's plan has been tried by all of you. I would like to hear reports on that. I have had absolutely no results from it. We all remember the fable of the frog who set himself up as a physician, and was taken to task for being so lantern-jawed himself. On the other hand I believe the time will come when it will be considered disgraceful for a doctor to weigh anything over two hundred pounds.

Dr. R. T. Sloan, Kansas City: I feel under obligations to Dr. Grindon for telling us why, in cases of obesity, it is advisable to limit the amount of water. It is taught in Germany that to reduce flesh we must reduce the liquid, and so firmly fixed is this idea in the layman's mind that many will try to take on flesh by drinking quantities of water. There are three things to take into consideration: First, heredity. There is where your razor-backs get their fine finish. They are skinny and they will stay so. You see people the same way. Then there is the question of diet. A patient is put on blue-grass and alfalfa and told to keep on eating blue-grass and alfalfa until he gets thin. We have been told that we eat too much. It is undoubtedly true that we can get along on much less proteids and carbohydrates. A certain extra amount of muscular exertion daily is also advisable in the reduction of fat. With a tractable patient it is not difficult to reduce his weight, but the difficulty is to keep it reduced. The treatment the essayist has given us is practically nothing but an alfalfa diet until the patient has used up his fat. But when the

patient has used up his adipose tissue and we have gotten him down to a suitable degree of rotundity, what are we going to do then? Certainly the diet given is not sufficient to maintain health. There is the difficulty: to give a sufficient quantity of food to maintain health and at the same time to keep down the weight. I have tried vichy and kissingen without much success. I have tried the thyroid treatment and it seems most unreliable. I would offer merely as a suggestion the use of ergot. It lowers the carbohydrate nutrition always. I have seen numerous instances where it reduced the body weight, the reduction being maintained after the abandonment of it. Of course, I would not recommend it in the case of patients with nephritis, arteriosclerosis, etc.

Dr. Franklin E. Murphy, Kansas City: The chairman cannot refrain from making reference to the relationship existing between gout, diabetes and obesity. It is important in the treatment of obesity to insist that the patient have not too many hours of sleep. Fat individuals may be very anemic. This feature of the case should not be overlooked.

Dr. Statler, in closing: I do not disagree with Dr. Grindon or Dr. Sloan. In my paper I said my plan was nothing new, it was simply a reduction of diet and putting in plain articles of food not mentioned in the dietary of many authorities. As far as heredity is concerned, a man might inherit a big appetite, or the reverse. Dr. Grindon said yesterday that he ate meat but once a week. Perhaps that accounts for his lack of weight. As to what to do after reducing the weight, I have noticed that, after having become reduced on this diet, the patient does not go back to excessive eating again. I know of one case where a colleague took kissingen and vichy and did not get a good result; he then went to another physician, who advised thyroid extract and adrenalin. While on this treatment he was very nervous but his weight was reduced. As soon as the treatment was stopped he began to gain in weight.

THE Putnams will soon publish a volume by Frederick Meakin, Ph.D., entitled *Function, Feeling, and Conduct.* This book is a convincing statement of the philosophy of morals as grounded in human nature. Concerned with a subject that is vital and fundamental in human relationships, it is bound to make an appeal to all thoughtful readers. The author has ransacked the philosophies of the ages, and in the upbuilding of his system invokes the authority of the past. But his work shows everywhere the indications of original and searching thought, and a directness of presentation that will appeal to every reader.

A CRITICAL REVIEW OF A SERIES OF APPENDIX CASES.

By L. A. Todd, M. D., St. Joseph, Mo.

The purpose of this paper is to present to the society the clinical observations made upon a series of cases of appendicitis. The cases from which the report was taken have been in the practice of Dr. C. H. Wallace and myself, and cover a period of four years: 1905-1906-1907-1908. A careful clinical record has been kept of all patients and an attempt has been made to follow their progress after leaving the hospital, as we appreciate the fact that a surgeon's duties do not end with a hospital discharge.

The series comprises 106 patients who underwent 115 operations for appendicitis, 9 patients being operated upon twice; the first operation consisting of simple coeliotomy with drainage and the second operation the removal of the appendix some weeks or months later. There were also 15 additional cases in which a pathological appendix was removed during the course of operations for other diseased conditions of the viscera.

Age. The average age of the 106 patients was 23 years, 4½ months. The oldest was 56 and the youngest 4. There were 3 cases in one year at the age of 4, all with peri-appendicular abscesses from perforation of the appendix. In dividing the cases according to decades the records show the following:

Up to and including 10 years,	10 cases
From 11 to 20 inclusive.....	33 cases
From 21 to 30 inclusive.....	38 cases
From 31 to 40 inclusive.....	17 cases
From 41 to 50 inclusive.....	7 cases
Over 50	1 case

Sixty-six per cent. occurred in patients under the age of 30.

Male and Female. There were 56 males and 50 females. Of 25 cases occurring over the age of 30, 9 were females, 36 per cent. Of 43 occurring under the age of 20, 17 were females, 37 per cent. Thus a majority of the operations upon females for appendicitis lay between the ages of 20 and 30.

Thirty-seven patients were married, or about one-third.

Previous Illness or Functional Disturbances. As to previous illnesses antedating the attack by a short interval we noted the following: influenza 2 cases, pneumonia 1, typhoid 9, rheumatism 1.

As to functional diseases of the abdomen complained of by the pa-

tient and cured or relieved by removal of the appendix the following were noted: slight attacks of abdominal colic extending over months or years, 14 cases, stomach and intestinal indigestion 19, constipation (marked) 7, although constipation did not seem to be a prominent factor in the causation as has been thought, and diarrhœa 3 cases.

Two patients had suffered injuries (contusion) to the side of the abdomen, one a week and one 4 years before operation. The majority gave a history of previous good health, the attack of appendicitis coming on without warning. Of these many were of the acute gangrenous type. Discomfort in the right side of the abdomen without any pain was a frequent pre-opertive complaint.

Previous Attack. Fifty-eight patients gave a history of having suffered previous attacks ranging in number from 1 to 10 and varying greatly in character. The average number of previous attacks was 3. The longest time between attacks was 7 years. In a patient in whom an abscess was drained but the appendix not found as it was thought that the organ had sloughed, a typical attack of catarrhal appendicitis developed 7 years later after the subsidence of which the appendix was removed.

Duration of Last Attack. Shortest time was 4 hours, the longest time 2 years, which case was characterized by symptoms of constant pain and tenderness in the right side of the abdomen. Appreciating the great importance of early removal of the appendix in all acute cases it has been our custom to advise the removal of the offending organ in all cases within the first 36 hours. Marked virulence and extremely rapid progress of the gangrenous cases were noted in one instance in which appendectomy with drainage was done 16 hours after the beginning of the attack. A completely gangrenous appendix with an extensive peritonitis was present and the patient died 36 hours later from septicæmia. Perforation in this case had occurred 3 or 4 hours after the onset of the first symptom. The most puzzling cases have been those of the acute suppurative type which were first seen after a progressive course of from 3 to 8 days. Whether to operate upon these cases at the time when first seen or endeavor to tide them over after the plan of Oschner was ever a difficult matter to decide.

Duration of the Disease. Varied from 4 hours to 15 years; more often it was months than years. The duration of the disease was short in the infected cases.

Symptomatology. In over 90 per cent. of the cases herein recorded the symptomatology was characteristic, the symptoms following in the order of their occurrence: pain, nausea or vomiting, local tenderness, fever. There was little variation in this order. Pain as an initial symptom was present in every case, the maximum intensity being reached in from 4 to 6 hours. In about 10% the pain gradually subsided in from 24 hours to 5 days, to be followed by a second attack as severe or more so than the first, with prostration and marked abdominal physical signs. This sig-

nified, in order of pathological progress; infection of the mucous membrane, gangrene of mucous membrane and appendix wall, perforation and peritonitis. The sudden subsidence of pain in the early stages of an attack should be regarded with alarm. Of nausea, vomiting and local tenderness, the latter condition was the most frequently noted. The determination of fever early in the attack could be made approximately, as a large number of the patients were seen late and had no knowledge of the existence of previous elevation of temperature. Murphy states that fever is not absent in a single infective case in the first 36 hours; that he will not operate unless he is confident fever has been present. The acute suppurative cases operated upon had temperatures from 100 to 104 in the early days of the disease. The leucocyte count was made a few times simply to corroborate the diagnosis. Its value in appendicitis has been over-estimated.

The unusual symptoms observed were—intestinal indigestion, diffuse pain in lumbar region and back, diarrhœa, persistent nausea and vomiting, abdominal pain with slight local tenderness and marked headache.

Physical Signs. In the acute cases the physical signs were those of acute peritonitis, localized in the right lower abdominal quadrant but commonly extending into the hypogastric, umbilical or lumbar regions. A tumor or mass was present in a number of cases, especially the children. The apparent or pseudo tumor mentioned by Murphy in the right iliac fossa due to contraction of the muscles and occurring early in the course of the disease was noted in two cases. Fluctuation was not often elicited. Percussion of the rt. iliac region ranged from flat to tympany. Muscle rigidity and local tenderness was never absent. The value of the last two signs can scarcely be over-estimated.

What was thought beforehand to have been a local collection of pus was found frequently to be a fibrinous inflammation of the peritoneum of the appendix and neighboring intestine with agglutination of bowel and omentum, but no fluid. In one case the mass, a small abscess surrounding the appendix tip, was found as low as the internal abdominal ring; in another the mass was in the median line above the bladder. In both instances pressure over the base of the appendix (McBurney's point) elicited great sensitiveness although this point was two or three inches distance from the seat of perforation. Temperature in the well walled off abscesses was often absent but an increased pulse rate was invariably present.

In the chronic cases the physical signs, while not so marked as in the acute variety, were nevertheless fairly uniform. Local tenderness and muscle rigidity, both varying greatly in degree were nearly always present. The presence of gas in the caecum was often noted as was also pain on pressing the base of the appendix against the contracted psoas muscle when the right leg was elevated. The appendix could be felt in 8 or 10 cases. Morris' sign, pain in right iliac fossa when ascending pressure is made over the descending and transverse colon, was in our

experience uncertain and untrustworthy. Many patients were anæmic. A movable right kidney was found near the appendix three times.

PATHOLOGICAL CONDITIONS ENCOUNTERED. *Macroscopical.*

There were 27 acute gangrenous cases of which 19 had perforated. Pus was present either within the appendix or surrounding the appendix in 15. Fecal concretions were encountered 10 times and grape seeds once, the seeds having been swallowed a year previous. Acute spreading peritonitis was noted in 11 cases and acute diffuse peritonitis in 6; of the latter 5 died. Limiting adhesions were absent in many of this series. There were ten cases which were classified as acute and subacute suppurative although a part of these may have belonged to the previous type. One fecal concretion was present in this class.

Twenty-six cases were of the acute catarrhal type. Three presented fecal concretions, 15 hemorrhagic spots in the mucous membrane, 9 kinks and constrictions; 3 mucous or serum in the lumen; 12 were surrounded by adhesions. In all 26 the serosa was highly injected. The 43 cases falling under the heading of chronic appendicitis presented many pathological conditions. Adhesions 18, displacements 10, chronic ulcerations 8, concretions 7, kinks and constrictions 12. More than one-third of the appendices showed macroscopic changes of fibroid degeneration or obliteration. Many of them presented the scars of previous acute attacks. The retro cæcal position seemed to be common in which case the appendix was often closely adherent to the wall of the gut.

Of the pathological conditions present complicating the inflamed appendix adhesions were the most commonly noted, occurring in about one-third of the cases. Complicating peritonitis was observed in about one-fourth of the acute variety. We have classified peritonitis; first, local with or without abscess; second, spreading, and third, diffuse. The spreading type—encountered 11 times,—was characterized by an intense inflammation of the visceral peritoneum extending as far as could be seen from the limits of the wound. In these cases recovery was the rule after rapid removal of the gangrenous appendix. Diffuse peritonitis, we consider an advance degree of the spreading type. Pus filled the abdomen in three of the five recorded cases. Enlarged, ilio-cæcal glands, pus tubes, intestinal obstruction, ulceration of the bowel and pylephlebitis were among the other complicating pathological lesions.

ASSOCIATED PATHOLOGICAL CONDITIONS, some of which were unquestionably due to the presence of an inflamed appendix, were diverticulum, retroversion, hypertrophied ovaries, right ovarian cysts, chronic pyosalpinx, and osteitis of 12th rib. One patient operated was 6 or 8 weeks pregnant.

A report of this kind must necessarily included mistakes. So far as we know, four mistaken diagnoses were made, yet at operation the appendix in two of the four cases presented gross pathological lesions A chronic ulcer of the stomach simulated the symptoms of chronic ap-

pendicitis. The appendix,—slightly bulbous and kinked, was removed but without relief of symptoms. A second operation 2 months later revealed the true pathological condition and a gastroenterostomy was done. There were two instances in which appendectomy was performed,—one for a long fibrous appendix buried in the posterior cæcal wall,—which afterwards were rightly diagnosticated as lesions of the right kidney,—acute and chronic unilateral hæmatogenous infections. An ulceration of the colon was also diagnosticated appendicitis, although the true lesion could not be determined until the abdomen was opened the second time.

There was no mortality among the acute catarrhal and the chronic cases. Of the acute gangrenous cases, six died,—five of general peritonitis with septicacema and one from an extensive cellulitis of the retro colic connective tissue. Four of the deaths occurred in the years 1905 and 1906. With three times as many operated cases in the last two years, the number of deaths has been two, a marked reduction which can be accounted for by insistence on early operation in every acute case. It is a fact that there should seldom be a death from appendicitis, but to attain such an ideal condition early diagnosis and early operative interference is imperative.

The technique of the operation depended somewhat upon the probable situation of the appendix and the pathological condition present. In about two-thirds of the cases the intermuscular or gridiron approach was employed. In 8 of the earlier operations direct incision through the internal oblique and transversalis muscles was practiced in the abscess cases, but this was abandoned in favor of intermuscular separation owing to the development of a post operative hernia. Several times it became necessary to employ Weir's modification of the intermuscular operation in order to secure a wider wound. Incision through the outer border of the right rectus was followed by a ventral hernia in one of the two cases in which it was used. Separation of the fibers of the rectus muscle, however, always gave a strong wound.

Ether was the anæsthetic invariably used. Chloroform alone was employed twice with one death. Chloroform preceding either was used in three cases followed by two deaths. It is the concensus of opinion among surgeons generally that ether is especially indicated in septic cases.

The appendix was removed at the primary operation in all but 10 patients. In one it could not be found. In 90% the appendix stump, after ligation, was buried in the wall of the cæcum. We have never noted an untoward result from this method. Seven patients whose primary operation consisted in laparotomy with drainage for periappendicular abscess, returned for appendectomy and repair of the abdominal wall.

Two cases in the series developed a hernia in the cicatrix. Both had been drained. In one the muscles were incised; in the other the incision was wrongly made at the outer border of the right rectus muscle.

One may never expect a post operative hernia when muscle can be sutured to muscle, provided the wound does not become infected.

The average stay in bed for each patient was 7½ days for the clean cases and 12 days for the ones that were drained. With the employment of the intermuscular operation, patients often sat out of bed on the 4th or 5th day and went home on the 7th.

In conclusion I wish to mention several pathological conditions with associated lesion of the appendix. During the course of operation for these conditions the appendix was examined, found diseased and removed. Four cases of right ovarian cystoma, one right intraligamentous and two right tubal cysts were encountered with associated chronic appendicitis. The relationship between cysts of the right uterine appendages and chronic appendicitis has been mentioned by many authorities. 30% as stated by Oschner. Acute and chronic salpingitis, retroversion, ovarian abscess, fibromyoma, and double intraligamentous cysts were found with a chronic inflamed appendix; as were also several cases of cholecystitis—with or without stones, and one case of hypertrophy of the prostate.

Lodge Practice in Pennsylvania.—Dr. G. D. Thomas, writing from Meadville, Pa., regarding the efforts made by the local physicians to repress lodge practice and contract work, says: "It is surprising how easy it was to convince those physicians engaged in this work that it was wrong in principle, and how readily it was abandoned. Without bitter condemnation, but with friendly reasoning, every doctor in the city signed the resolution agreeing to cease contract practice work for lodges and fraternal societies. The fact that for $2 a physician was expected to treat for a year all members of a family under 18 years of age, be the members two or a dozen, was easily shown to be unfair to the public and an injustice to the profession. The public, with few exceptions, see the matter in the same light, and up to the present, no one has been prevailed on to come from the outside to enter into a contract to do the work abandoned by local physicians."

The essential and distinguishing feature of the objectionable contract practice, as shown in last week's JOURNAL, is the existence of a middleman who buys the physician's services at wholesale and sells them at retail, thus farming out the physician to the public under an agreement whereby the physician gets a pittance and the patient gets poor services, while the middleman alone, who reaps the difference as his profit, is the gainer. If the question can be placed in this, the true light, before both the public and the profession, there is little doubt as to the outcome.—*Jl. Am. Med. Assn.*

MY OPERATION FOR THE EXTIRPATION OF THE LACHRYMAL SAC.*

By C. Barck, M. D., St. Louis.

Synopsis: The incision is made mesially to the insertion of the internal palpebral ligament, directly down to the bone. The lachrymal sac is detached from the bone by curved elevators, and loosened all around by a curved hook. It is then severed at the entrance into the nasal duct. Then it is forcibly drawn down and out, and the excision completed.

The incision commences two mm. above, and just mesially to, the insertion of the internal palpebral ligament, which is an easy landmark. It is, as usually, about 1.5 c.m. long, and slightly curved. It is carried directly through the soft tissues and the periosteum to the bone. By making this incision more mesially than is ordinarily recommended, it can begin at the mentioned high point without injuring the ligament. If made more temporally, it is necessary either to sever the latter or to commence the incision below it. In the first instance disfigurement is likely to follow; in the second, the space is too limited. The incision will strike the slight groove in front of the Crista of the nasal process of the superior maxilla. The hemorrhage, which is frequently encountered now, the greatest during the entire operative procedure, comes from one of the larger blood vessels running down the nose, and can easily be controlled by one or two artery forceps.

As wound retractors, I have tried the different self-retaining specula, and have arrived at the conclusion that the old-fashioned hooks are superior. The self-retaining specula fall out too easily and thereby cause delay. In the absence of sufficient assistance they are, of course, of value; but where there is no want of such, the hooks are preferable. As a rule one only is necessary to draw the temporal wound lip away; the mesial one retracts somewhat spontaneously.

The orientation from now on is not difficult. Just temporally to the incision through the periosteum, is the Crista of the superior maxilla, and immediately beyond this is the fossa lachrymalis, in which the sac is situated.

In order to facilitate the orientation still more, a probe might be introduced through the slitted upper canaliculus and sac into the entrance of the nasal duct, either now, or before the commencement of the operation. This step, valuable for the beginner, is hardly necessary for the experienced operator.

*Read in the Eye, Ear, Nose and Throat Section, Fifty-second Annual Meeting Missouri State Medical Association, Jefferson City, May, 1909.

The dissection of the sac commences with its detachment from the lachrymal bone, the wall of the sac and the periosteum being there one and the same. For this purpose I use two periosteal elevators, a bent one during the first part, and a half curved one later on. Finally I encircle the sac with a curved hook, dividing the tissues without cutting. The instrument I use, is similar to a small strabismus hook, only more curved. After the lower portion of the sac has thus been entirely freed, it is severed with scissors as close to the entrance into the nasal duct as possible.

Then the lower end of the sac is firmly secured with strong forceps and forcibly drawn down and outward. If a probe had been previously introduced, it is now withdrawn. The remaining dissection of the sac, especially of the upper portion, which offers the main difficulty, is rendered very easy by this method. In the former ones, where the cupola was dissected, while the sac was in situ, the work had to be done in the dark. The cutting with the scissors, high up under the internal ligament, was difficult, and we could never be certain, whether the entire sac with its frequent recesses was removed, or whether portions of the mucous membrane were left behind. That in such an instance the suppuration does not cease entirely, is well known. Still more unpleasant was the profuse hemorrhage, which nearly invariably took place during this part of the operation, and with which every operator is familiar. This abundant bleeding was the dreaded feature of the operation. Clamps cannot be used there, and digital compression in the angle of the nose was the only means at our command to control it to a certain extent. It delayed the progress of the work enormously, so that the small operation sometimes occupied nearly an hour. By severing the lower end first, and drawing the sac out of its cavity, the field is always open to view. The cupola of the sac can be excised completely. And on account of the stretching, and because the cutting can be done close to the walls of the sac, the hemorrhage is reduced to a minimum. I have not been impeded by a single one, during twenty operations or more by this method. Therefore this step can be finished in a very brief time, and the length of the entire operative procedure is reduced to one-half or even one-third.

Finally, the nasal duct is curetted as far down as possible. The galvano-caustic destruction of the canaliculi, I have never found necessary.

Three or four stitches will close the wound as a rule. That the cavity should be carefully cleansed, and all hemorrhage checked before closing, is hardly necessary to mention. In order to obtain union by first intention, it is necessary to bring the soft tissues in close contact with the bone and to prevent accumulation of secretion between them. This is done by packing tightly the cavity left. I proceed by placing a small pellet of compressed cotton into the cavity, and while holding it there firmly,

adding successively others, until the entire depression is filled; then a compressive bandage is applied.

Healing by first intention is expected, and is the rule. If there are no untoward symptoms, the bandage is left in situ until the fifth or sixth day, when the stitches are removed.

By this method the extirpation of the lachrymal sac has lost much of its unpleasantness, and may be easily finished in 15 to 20 minutes; the ratio in time being the same as the one between my description and the lengthy one of Meller from the Vienna clinic, with which I suppose you are all familiar. The principle is an old one in surgery; no abdominal surgeon will sever adhesions or vessels of a cyst or tumor inside of the abdominal cavity in the dark, but will first pull it out. It is only astonishing that this principle has not been applied before.

I wish to add, that I have tried local anesthesia for this operation in a number of instances, but that it has proven unsatisfactory. I prefer to employ a general anesthetic.

(The drawings, illustrating the different steps, were taken from the operation on the cadaver.)

DISCUSSION.

Dr. J. S. Lichtenberg, Kansas City, said that Dr. Barck had extremely simplified the operation. He asked whether or not the doctor used adrenalin-cocain-alypin as a local anesthetic and whether he used adrenalin during the operation to control the hemorrhage; also, whether a clamp could be used on the nose to control the hemorrhage. He asked for further information as to the use of cotton pledgets.

Dr. J. H. Thompson, of Kansas City, said, the trouble in removing the sac was chiefly due to the hemorrhage. Local anesthetics in his cases had proved troublesome, and lately he had used a general anesthetic. His method was to open up the canaliculus, introduce a probe into the sac, cut down on that, and then dissect out the sac by blunt dissection. He then clamped it in a hemostat, pulled it down and cut it off. He thought that it was bad to pack the wound. His method was to catch up the spurters and compress.

Dr. Barck, in closing, stated that his paper dealt only with the detail of the operation. The indications thereto were osseous stenosis of the nasal duct, incurable chronic suppuration of the sac, and chronic dacryocystitis when an ocular operation was necessary. Paraffin injections are unnecessary. It is always best to remove the sac in toto; but this is not always possible. Formerly, the hemorrhage made the operation very long, sometimes taking an hour and a half. But if the lower end is cut off first, hemorrhage is always done away with. Adrenalin is useless. He had tried all the local anesthetics but, in his opinion, the operation is too painful. If the sac is completely removed healing by first intention is always obtained. Sometimes a slight epiphora exists which usually disappears later. However, it is sometimes necessary to remove the accessory lachrymal gland later on. The packing is made after the wound is sutured.

SCIENTIFIC EMPLOYMENT OF DRUGS.*

By W. R. Patterson, M. D., Tipton, Mo.

The employment of drugs in the cure and alleviation of disease is a power for good in the hands of properly educated physicians. No one has reason to be ashamed of the progress of medical science. Other branches depend upon the use of drugs and it is the key-stone of the arch upon which medical investigation rests. The triumphs of surgery are made possible by the use of ether, chloroform, cocaine, corrosive sublimate, carbolic acid and other drugs.

This branch has been much abused by over-dosing and lack of scientific use. Our forefathers' work was not without good, although many of the remedies employed by them appear fetishes in the light of our present knowledge. They were handicapped by theories of disease then prevalent and by lack of scientific information. Through their mistakes, their experience and their toil we have profited, and to them we are debtors.

The days of hyper-medication and unscientific employment of drugs set up a reaction that aided in the purification of the therapeutic art and brought great strides of advancement along scientific lines.

The study of pathology and bacteriology and the use of such diagnostic aids as the microscope, have brought about the mutual coöperation of the man at the bedside and the man at the laboratory. A more definite idea of the cause of disease and the recuperative power of nature gives a basis on which has been built a scientific method of employing drugs.

It is not the aim of this paper to decry any scientific method of treatment, but to give this branch the attention it deserves as a science.

The individual who believes that the administration of drugs is a hoax, is without experience, or is wrongly employing them. A large part of the skill consists in fitting the dose to the needs of the individual patient, with a clear conception of what is desired to be accomplished. There should be a thorough knowledge of the therapeutic effect upon the human system of every drug used, its limitation, also its synergistic and incompatible relation to each other ingredient of the mixture. It is better to know but few drugs than not to know them well, and none should be given unless there is a distinct indication for its use.

There are honest differences of opinion as to many therapeutic questions, but that is no plea for ignorance. It would be a great aid to

*Read in the Medical Section, Fifty-second Annual Meeting, Missouri State Medical Association, Jefferson City, May, 1909.

therapeutics if physicians would make a practice of carefully keeping clinical records of the effects of drugs. While there has been so much accomplished, among which is the isolation of the active principles of crude drugs, the physiological standardization and the triumps of bacteriology that brought the use of serum treatment; there still remains much needed work to perform. It is not our aim to dwell on the successes that have been attained so much as to point out some imperfections. Nor do we intend to bring abuse upon the profession, but to perform the duty that each member owes to it,—calling attention to its defects, and aiding in bringing reform. To act otherwise would retard progress. Nor do we seek the reputation of the iconoclast, but we must be consistent, and if ethical, must endeavor to prevent the transgression.

One of the hindrances to the scientific employment of drugs is the miscellaneous use of shotgun prescriptions and the excessive use of "hand-me-down" formulas. Some formulas that are almost impossible to make extemporaneously on short notice, which possess recognized convenience and efficacy are allowable, if from reputable manufacturers who publish full and honest formulas and who sell at a reasonable price. There is nothing inconsistent in specifying a firm name if their preparations are ethical and of superior quality. I do not enter into the hue and cry against the manufacturers while they supply trustworthy products.

A greater hindrance is the use of the semi-secret or proprietary preparation. In the principles of medical ethics, adopted by the American Medical Association, in Section 8 will be found: "It is derogatory to professional character for a physician to dispense or promote the use of a secret medicine, for if such nostrums are of real efficacy any concealment regarding their use is inconsistent with beneficence and professional liberty." Why should any member of the profession endorse such principles and then be willing to play second fiddle to nostrum fakirs, while the manufacturer ignores these principles and waxes fat at the physician's expense. Any patent or copyrighted protection of name encourages the unscientific employment of drugs and hinders unbiased discussion and honest reports. The physician is mislead by fascinating clinical reports coming from paid communications, so notorious at present. Generally these lauded, high-priced specialties are forced upon the innocent public by the physician when he could know what he was prescribing by using a national formulary preparation, which would be as good or even better. Another reason for thus denouncing the use of protected name preparations, is that different firms give different names to similar preparations, and the physician has no inclination to remember all such names, much less to request his pharamacist to keep them in stock. Often the laity learn that a certain doctor has prescribed a certain preparation, which another doctor is not familiar with, and they deem this a lack of information. The profession is being deluded by adept literature, slick-tongued detail men of the manufacturer of proprietaries whose

sole aim is commercialism. It appears that often physicians depend upon some proprietary pamphlet or advertising literature for their knowledge of therapeutics. If such preparations carried a full and true formula, it would be the abolition of proprietoryship.

The council on pharmacy and chemistry organized by the American Medical Association to investigate proprietary medicines, in passing upon them, does not imply their recommendation. It only implies an unbiased judgment of a correctness of the claims of composition. The profession would be benefited if it would join in the propaganda of reform and depend upon the Pharmacopeia, U. S. Dispensatory, National Formulary, and modern works on materia medica.

A learned profession must maintain its self-respect in order to command respect. If it condemns the use of patent medicines among its clientele, it should clean house at home before it should begin to sweep other people's premises. All that have been prescribing preparations with twisted and diluted formulas should no more be guilty of puerile gullibility, but repent and transgress no more.

A more rational study of the physiological action of drugs and its application to disease should be made, and every physician could hasten the progress by clearing his own intellectual atmosphere. He should stand by the principles that bring to the profession honor and make it honorable. The great reform of the scientific employment of drugs has come to stay until the end has been accomplished.

$100,000 for a Tuberculosis Cure. Dr. George W. Bloomer, of Yale University, as spokesman for an anonymous giver, has announced a prize of $100,000, to be awarded to the first person anywhere in the world who discovers a cure for tuberculosis. The gift is unconditional as to time, place or kind of cure; the only real stipulation is that it must have been in constant use for at least five years, and that its promoter shall convince the investigating board of its merits.

Among the physicians invited to act on the board are Dr. E. L. Trudeau of Saranac Lake, N. Y.; Dr. Simon Flexner of the Rockefeller Institute; Dr. William H. Welsh of Johns Hopkins University, Baltimore; Dr. Lawrence F. Flick of Philadelphia, and Dr. Hermann M. Biggs, chief medical officer of the Department of Health, New York. They will use the income from the $100,000 to investigate the cures brought to their notice. To prevent the exploitation of quack remedies, they will reserve the right to analyze all medicines presented.

The donor says that his principal reason for giving the prize is to encourage research for an anti-toxin, serum, or drug that will cure tuberculosis. Physicians have worked for years to perfect or find such a cure but thus far the experiments have not furnished a product which will absolutely cure or prevent consumption, or render the patient immune. Many serums have proved effective in increasing the resistance of the patient and have thus helped in his restoration to health, but no scientist of repute to-day claims to have discovered a tuberculin which will cure without the aid of fresh air, rest and wholesome food.

SURGICAL DYSPEPSIA.*

By Fritz J. Moennighoff, M. D., Kansas City, Mo.

We are gradually learning more and more of the great importance of chronic dyspepsia, indigestion and other forms of maldigestion, in the diagnosis of surgical disease of the alimentary tract and associate organs. Observations upon the living pathology instead of in post mortem room pathology, have taught us that dyspepsia is nearly always a concomitant and important factor in the symptom syndrone of such diseases as chronic appendicitis, gall stone and pancreatic disease, gastric and duodenal ulcers and gastric and intestinal malignancy.

Pure functional dyspepsia is usually an acute trouble, amenable to medicinal treatment, whereas the variety due to organic disease and structural changes in the organ involved is always chronic, though subject to acute exacerbations at intervals.. It is this latter variety which mostly concerns the surgical diagnostician. It is the warning signal that some pathological change is gradually and insiduously being implanted upon the normal economy. It is the initiative, or, as Moynihan calls it, the inaugural, symptom of some morbid process somewhere in the alimentary tract or its adjuncts. We must make a careful and complete analysis of every case of unyielding dyspepsia and indigestion. It is only by this means that we can prevent easily curable cases from becoming difficult and dangerous, and even incurable.

Another condition which is chronic and has some symptoms of maldigestion, is pericolitis. This condition has only recently been brought before the surgical world. Many cases of supposed chronic appendicitis have not obtained relief from existing symptoms by operation upon the appendix, because the primary focus of trouble was not in the appendix, but in the ascending colon, where a right-sided, chronic, membranous peritonitis produced the pathological picture.

These sufferers from maldigestion are battered and tossed about in the sea of medical therapeutics, from year to year, until terminal symptoms supervene and the case is then, finally and hesitatingly, brought to the surgeon as a measure of last resort.

How often, then, do we find malignant disease beyond the reach of operative cure; how often then do we find ulcers undergoing cancerous degeneration; how often then do we find gall-bladders shorn of all resemblance to a normal organ, matted and lost in a mass of inflammatory tissue, forming perigastric and pyloric adhesions. All these are merely

*Read in the Surgical Section, Fifty-second Annual Meeting, Missouri State Medical Association, Jefferson City, May, 1909.

matters of statistics. Why not, after you have tried out your armamentarium of drugs in a fair trial and failed, why not, I say, seek the arcanum by exploratory laporatomy.

618 Commerce Building.

DISCUSSION.

Dr. H. E. Pearse, Kansas City: I think the paper is remarkable for its brevity. It covers in its brief pages a great deal that has proven perplexing in my own practice and I am sure in the practice of every one of us. The work which Dr. Jackson, of Kansas City, reported before the Western Surgical Association, and which he will also report before this session, in the treatment of what he calls pericolitis, it seems to me is far short of a solution. The clinical picture is very aptly described by Dr. Meonnighoff. I think there is in these cases an intoxication in the peritoneum from stasis. They often have the symptoms of appendicitis and the diagnosis is very difficult, simulating, as it does, other conditions. If surgical measures are undertaken for the relief of these patients it is only partially successful. I think we have a problem here which should be taken up and worked out by a joint meeting of the medical and surgical sections of this Association. I believe it is largely a medical disease.

"WHAT is Wrong With Our Public Schools." The foregoing is the generic title of an extraordinary series of six special articles, by Joseph M. Rogers, to be published in *Lippincott's Magazine,* beginning with the January issue. Notice that there is no interrogation point after the title. It is not a question. Mr. Rogers is dealing with facts—facts ascertained by him after months of the most arduous and careful research. Says Mr. Rogers:

"There is something wrong with the public schools. More than that, there is something fundamentally wrong with our theories of education. We teach, but we do not educate. We spend a good deal of money and energy to little purpose. It is not necessary to prove these statements. They are admitted by educators, from university presidents to primary teachers; by school administrators, from state and federal officials down to those in the smallest country districts; by parents the country over; while children themselves are, of course, dissatisfied. This series of articles is designed to examine—untechnically—the defects of existing systems, offer some constructive criticism, and make suggestions looking toward improvement. It is hoped through them to arouse among both parents and teachers a deeper interest in the needs of our public schools, to the end that there may be less complaining and more intelligent effort to amend conditions."

Some months ago, Mr. Rogers contributed to *Lippincott's* a series of papers entitled "Educating Our Boys," which attracted wide attention. The new series will make a still stronger appeal, for it deals clearly and succintly with a topic of vital interest to every man, woman and child in the United States. Teachers everywhere and, in fact, everybody who is directly or indirectly interested in the cause of education, will find these articles helpful and enlightening. The first, on "Some Notable Deficiencies," will be found in the January number. Other papers, on "Education Outside of Books," "The Teacher," "Some Reforms Suggested," "The Cost of Improvement," and "A Model School Outlined," will appear in consecutive numbers. It is not too much to say that this is one of the most striking and noteworthy series of articles ever brought out by any magazine.

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EDITORIAL

THE STATE MEDICAL ASSOCIATION AND STATE ELEEMOSYNARY INSTITUTIONS.

The policy which at present dictates the methods of conducting our State eleemosynary institutions will, if we read the signs of the times aright, soon be changed and the spoils system be relegated to the limbo of political discards. The impatience of the people with existing conditions is a necessary step in the achievement of social reforms, and the angry attitude of the people towards the present policy of directing the affairs of our State eleemosynary institutions is sure to result in a change in the system as now practiced.

These institutions should be a source of the highest advantage to the State, for they ought to be centers of study in the diseases encountered there from which study many valuable lessons in their treatment and control could be gained. Before this can be accomplished, however, all State eleemosynary institutions should be lifted out of politics and their management entrusted to men who have knowledge and talent of how to improve their opportunities for studying the conditions they meet with and evolve more effective methods of treatment, for the enlightenment of the medical profession and the instruction of the people.

The control and management of these institutions are matters of serious concern to the State medical organization, for it cannot escape severe criticism when things go awry, and therefore the State Medical

Association should not be ignored when the appointment of medical men to responsible positions in these institutions is about to be made. A civil service commission for the examination of applicants for these positions has demonstrated, in other States, the effectiveness of such a system in securing competent persons, and we have advocated the adoption of this system in Missouri. Until such a system can be established the organized medical profession of the State ought to be consulted as to the fitness of applicants for positions and the candidates be selected from the membership of the State Medical Association after having been recommended and endorsed by that body.

We hope the county societies will take up the consideration of this question and discuss it in their meetings so that at the Hannibal meeting on May 3d the Association can declare its attitude towards existing conditions as they affect the medical control of our State eleemosynary institutions.

THE CONVENTION FOR THE REVISION OF THE PHARMACOPEIA.

The high importance of the Convention for the Revision of the Pharmacopeia, which will convene in Washington May 10, 1910, should impress the members of the State Association with the necessity of acquainting themselves with the definite objects which this Convention will have in view in its work of revising the pharmacopeia. In order to bring the matter before county societies, we publish an editorial from the December 4th issue of the *Journal* American Medical Association, and urge the officers of all county societies to act upon the suggestions offered, so that the medical profession shall in future be more closely identified with the work of revising the pharmacopeia than has been the case in the past. The editorial follows:

"The importance of the next Pharmacopeial Convention should be thoroughly understood by all medical societies and physicians. These conventions, as well as the national Pharmacopeia, originated in a proposition submitted to the Medical Society of the County of New York by Dr. Lyman Spalding in 1817. Dr. Spalding proposed that the United States be divided into four districts—northern, middle, southern and western—and that each district should hold a convention of delegates from the medical societies and schools situated within it, to formulate a pharmacopeia. The four district pharmacopeias were to be taken to a general convention to be held at Washington, composed of delegates

from the four districts. From the district pharmacopeias the delegates were to compile a national pharmacopeia. This plan was adopted, the district convention for New England being held in Boston and the convention for the middle states in Philadelphia, June 1, 1819. No conventions were held in the southern and western districts, but delegates to the national convention were appointed. The first general convention for the formulation of a national pharmacopeia met at Washington, January 1, 1820. The two pharmacopeias prepared in the northern and middle districts were consolidated into one work, which was published in Boston, December, 1820, in both Latin and English. A second edition appeared in 1828.

The convention of 1820 provided for its own perpetuation and for future revisions, by instructing its president to issue notices in 1828 to all incorporated state medical societies and incorporated medical colleges and schools, asking each to vote for three delegates to represent the district at the general convention to be held at Washington in January, 1830, the convention to consist of twelve delegates. The second convention was held at Washington on January, 4, 1830, thirteen delegates being present. It provided for its perpetuation by instructing its president to issue a notice to incorporated state medical societies, incorporated medical colleges and incorporated colleges of physicians and surgeons, asking each to elect three delegates to attend a general convention to be held at Washington in January, 1840. The district plan of representation was given up and has never been resumed.

At the third convention, held in 1840, twenty delegates were present. A committee on revision and publication was appointed which published the second revision of the Pharmacopeia in 1842. This committee was instructed to ask the coöperation of schools of pharmacy in its work.

In the call for the fourth convention of 1850, incorporated colleges of pharmacy were included and were allowed to send three delegates, the same as medical colleges. This convention, which met at Washington in May, 1850, was composed of thirty delegates. Only two pharmaceutical schools were represented, all of the other delegates being from medical colleges and societies.

In 1860 the fifth annual convention was held, thirty delegates being present, four colleges of pharmacy being represented.

The sixth convention was held May 4, 1870, sixty delegates being present, seven pharmaceutical schools being represented. The fifth revision was published in 1873.

The seventh convention met May 5, 1880. One hundred and nine delegates were elected to represent ten medical societies, twenty-three medical colleges, eleven pharmaceutical colleges and the medical depart-

ments of the Army, the Navy and the Marine-Hospital Service. Seventy-five delegates were present.

The eighth convention was held on May 7, 1890, 175 delegates being present, representing fifteen medical societies, twenty-three medical colleges, twenty-five pharmaceutical associations, twenty-three colleges of pharmacy and the medical departments of the three government services. The provisions made for representation in 1900 were the same as those for 1890.

The ninth decennial convention was held at Washington May 2, 1900. Forty-one delegates were present representing twenty-six medical societies, forty-four delegates from thirty medical colleges, fifty-three delegates from twenty-seven pharmaceutical colleges and fifty-seven delegates from twenty-eight pharmaceutical societies, the American Medical Association, the American Pharmaceutical Association and the three government services being represented by twelve members. The total attendance, as shown by the official report, was two hundred and seven, of which one hundred and fourteen were pharmacists and ninety-three were physicians.

The point to be emphasized in the above historical summary is that the convention was originally inaugurated and for many years carried on solely by the medical profession, and that it was not until 1850 that other than medical societies and medical colleges were authorized to send representatives. In that year, pharmaceutical colleges were for the first time given representation. Not until 1890 were pharmaceutical societies added to the list of accredited bodies.

The medical profession during the past thirty years has not given to the revision of the Pharmacopeia the attention which its importance deserves. In spite of the fact that this book originated with the medical profession and was compiled and published primarily for its use, it has come to be regarded too much by physicians as a book which is of interest and value mainly, if not solely, to the pharmacist and in which the physician is not especially concerned. The attitude of the physician toward the Pharmacopeia, as well as the lack of knowledge on this subject has been frequently commented on in THE JOURNAL. It is now time that specific and lasting reforms were effected. Two definite steps should be taken before the meeting of the next convention in Washington: (1) All incorporated state medical associations and medical colleges entitled to representation should select the three best representatives possible and should see to it that they attend and take part. (2) Each county society should devote at least one meeting during the winter to a discussion of the present Pharmacopeia and the formulation of suggestions as to its improvement.

There is, indeed, grave danger lest this work, which was primarily a reflection of the needs of the medical practitioner, should become a purely pharmaceutical rather than a medical compilation. There is also danger of its being controlled by commercial interests. Such a result will be due solely to lack of interest and activity on the part of the medical profession. Active interest in this matter should be aroused and medical societies should see to it that they are properly and effectively represented in the coming convention, and that their delegates are instructed regarding the desires and opinions of those they represent. If every county society will devote one evening to the discussion of this question and will send its recommendations to Dr. Reid Hunt, chairman of the Committee of the American Medical Association on the Pharmacopeia or to the Council on Pharmacy and Chemistry of the American Medical Association, their recommendations will be transmitted to the convention and will receive consideration."

MEDICAL LIBRARY OF THE STATE UNIVERSITY OPEN TO THE MEDICAL PROFESSION.

A policy has been adopted which makes the Medical Library of the University of Missouri a free circulating library, open to the physicians of the State. In accordance with an order passed by the Board of Curators of the University, any reputable physician of the State may borrow books from the medical library for a period of two weeks, which may be extended to four weeks. The only expense to the borrower will be the postage or express charges for transportation. It is hoped that this privilege will be of considerable value, since it will make available to the physician many books and periodicals which he could not otherwise afford.

A brief catalogue of the principal works in the medical library will be published soon and will be mailed free to all interested upon application. A portion of the appropriation available for this library will be devoted exclusively to books desirable for circulation among the practicing physicians of the State. Every physician is therefore urged to send in immediately a list of the books of this character which the library should contain. Those books will be purchased for which the demand is greatest. Communications concerning the medical library may be addressed to Mr. H. O. Severance, Librarian, or to Dr. C. M. Jackson, Dean, University of Missouri, Columbia, Mo.

THE ROSTER.

In this issue we publish the roster of membership. Only those who are in good standing, *i. e.*, who have paid their dues, are included in the list. In order to keep in good standing it is essential that members pay their dues promptly, and every year's dues must be paid. If a member fails to pay his dues in any year he is delinquent and cannot be reinstated to good standing until all back dues are paid. In the meantime he is depriving himself of all the benefits of membership, including legal defense against malpractice suits.

NOTES

POST-GRADUATE CLASS OF THE BOONE COUNTY MEDICAL SOCIETY.

The Boone County Medical Society organized a Post-Graduate Class on October 7, with Dr. C. M. Jackson as chairman, and Dr. A. W. Kampschmidt as secretary-treasurer. The class meets regularly every Thursday evening from 7 to 8 p. m., at the Parker Memorial Hospital in Columbia. The program outlined by Dr. Blackburn is followed as a general guide, modified so as best to adapt it to local conditions. Following each meeting a brief social session is held, consisting of a smoker with simple refreshments, such as apples, sandwiches and coffee. The work has, on the whole, been quite satisfactory, the average attendance being about twelve.

BANQUET FOR DR. McALESTER.

On November 13 a banquet was given in honor of Dr. A. W. McAlester, on the occasion of his retirement from the University of Missouri. He has held the positions of Professor of Surgery and Dean of the Medical Department since 1873. The banquet was held at the Gordon Hotel, in Columbia, and was attended by about fifty members of the faculty and physicians of Columbia. Several speeches were made, including the reading by Dr. J. W. Connaway of a poem composed especially for the occasion. At the close of the exercises, Dr. McAlester was presented with a bound volume of autographic greetings from his former students, many of whom were present.

CORRESPONDENCE

To the officers and members of state medical licensing boards. To the officers of state medical associations. To members of the National Legislative Council. To university presidents, college professors and others interested in medical education and medical legislation:

A special conference on Medical Education and Legislation will be held at the Congress Hotel (formerly the Auditorium Annex), Chicago, Monday, Tuesday and Wednesday, February 28, March 1 and 2, 1910, the session to begin at 10 o'clock Monday morning.

On Monday the Council on Medical Education will hold its Sixth Annual Conference. A report will be presented showing the present status of the medical colleges in the United States and another report giving practical tests in state license examinations. Other important topics bearing on medical education will be discussed.

On Tuesday there will be a Joint Conference on Medical Education and Medical Legislation, at which the essentials of a model medical practice act will be considered.

On Wednesday the Committee on Medical Legislation will hold its Annual Conference, discussing a National Bureau of Health, vital statistics, pure food and drugs, expert testimony, and other live topics.

You are most cordially invited to attend this conference and to participate in the discussions.

COUNCIL ON MEDICAL EDUCATION,
N. P. Colwell, Secretary.

COMMITTEE ON MEDICAL LEGISLATION,
Frederick R. Green, Secretary.

TO THE EDITOR:

The following is an extract from the minutes of the House of Delegates of the American Medical Association, Atlantic City, N. J., June 10, 1909, favoring open meetings of county, district and other local medical societies.

WHEREAS, The American Medical Association, not only as one of its declared purposes, but by numerous lines of activity, many of them connected with the Section on Hygiene and Sanitary Science, stands committed to the education of the public with respect to the nature and prevention of disease; and,

WHEREAS, The demand for such popular education with respect to tuberculosis, cancer, typhoid fever and other decimating diseases has become urgent; therefore, be it

Resolved, That all county, district and other local medical societies be, and they are hereby, requested to hold annually one or more open meetings to which the public shall be invited to attend and participate and

which shall be devoted to a discussion of the nature and prevention of disease and to the general hygienic welfare of the people.

It was moved that the resolution be adopted.

Seconded and carried unanimously.

GEORGE H. SIMMONS,
General Secretary American Medical Association.

To the Auxiliary Legislative Committee of the American Medical Association:

I beg leave to advise you and, through you, the medical profession of your county, that at a meeting of the Committee on Medical Legislation of the American Medical Association, held at Chicago on October 16, I presented my resignation as a member of that Committee to become effective November 15, 1909, or sooner, on the appointment of my successor.

This step has been made necessary on my part, first, because my surgical practice makes it imperative that I decline all engagements that may take me away from my office and operating room, and, second, because the duties of the Committee have grown until they can no longer be discharged by any man who cannot devote, if not all of his time, at least more time to them than is consistent with my obligations to my clientele.

I must, however, ask for the privilege of tendering a few final words before I can accept exemption from further sacrifices incident to relations that I have sustained with pleasurable devotion for the last seven years. During that time, by virtue of its splendid organization, the medical profession has been able to assist in the accomplishment of important reforms. Among these reforms may be mentioned the improved status of the medical profession in the governmental organization of the Isthmian Canal Zone, the reorganization of the Army Medical Corps, the passage of the Pure Food and Drugs Act, the recognition by the government of the heroic services of physicians, the defeat and resulting retirement from office of important personages whose influence was inimical to the welfare of the people along lines represented by the medical profession, the promotion of a sentiment in behalf of state licensure in medicine and the preparation of a model act to that end, the education of the public on questions of medical legislation, the development of a strong public demand for the creation of a broader and stronger national public health service, and, finally, the development of an organization by which the influence of the entire medical profession can be brought to bear on great questions of legislation and public policy.

It is to be remembered, however, that all great reforms have been and must be effected to the embarrassment if not actual injury of unworthy interests that are thereby prompted to efforts at retaliation. Such efforts are in progress at the present time. Unworthy and discredited manufacturers of impure, adulterated and misbranded foods, fraudulent drugs and spurious liquors are to-day conspiring with certain equally unworthy and discredited members of the profession to blacken the character of its honored leaders, and thereby distintegrate its organization. The paid representatives in Congress of selfish and sinister enterprises, the jealously ambitious members of the public services outside of the

medical profession, together with the ignorant and venal pretenders in medicine, are endeavoring to break down the reforms by which they have been adversely affected. In this way the Pure Food and Drugs Act is being insidiously annulled by vicious interpretations that are foreign to the purposes of the people and the Congress in enacting the measure. An effort is being made to resubordinate the medical service in the Isthmian Canal Zone to authority that has no technical qualification for the supervision of its functions. Discredited officials are endeavoring to re-establish their power. Ignorance and superculture, allied under the guise of cults, are endeavoring to break down the medical practice acts of the states. Mercenary and merciless enterprises, antagonistic to the welfare of the people, are conspiring to defeat the movement for a national department of public health.

To overcome these antagonisms, to maintain the reforms already realized, and to accomplish other reforms, the necessities for which are flagrantly apparent in our national life, is to-day the first obligation of the medical profession both to the people and itself. Its natural guardianship of the public welfare cannot be ignored or evaded. It can discharge that duty only by an intelligent *esprit de corps* made effective through the instrumentality of far-reaching, well-disciplined and courageous organization. To this end the officers and committeemen of our national body should be unstintedly supported in their altruistic work; the state associations should be strengthened; but, above all, the county societies, the units of strength and efficiency, should exemplify in the highest degree the principles of complete organization and disciplined coöperation.

After a consensus has been reached on any question in any county, every member should become the teacher of the public on that question in his respective locality. The public intelligence thus enlightened, public conviction may find expression in public action, if need be at the polls. The medical profession must carry weight, not only by the wisdom of its councils, but by its actual power with the people as the natural conservator of their physical welfare and their normal efficiency. In the exercise of its prerogatives, the county medical societies should hold open meetings to which the public are invited and before which questions of profound general concern should be discussed and appropriate action taken. These questions should pertain to every phase of protection against disease-producing influences in water, food, habitation and personal hygiene. The whole agitation, while not disregarding the defense of existing reforms, should, however, be largely concentrated in the immediate future in behalf of action by the Congress to establish an improved national public health service—a measure which, in every form of practical legislation, I am authorized to state has the cordial support of President Taft.

With deepest gratitude that I have been permitted to act as an humble servitor of my profession in carrying out some of these reforms and with assurance that nothing but the inexorable demands of my practice and of my obligations in life could induce me to relinquish the work yet to be done by and through the matchless organization of the American Medical Association, I am

Very sincerely,

CHARLES A. L. REED.

60 The Groton, Cincinnati, Ohio, October 26, 1909.

COUNTY SOCIETY NOTES

ADAIR COUNTY MEDICAL SOCIETY.

The Adair County Medical Society met on December 2, 1909. The secretary being absent, Dr. Butler was appointed to act as temporary secretary. The following members were present: Drs. Quinn, Martin, Callison, Butler, Reid, Gashwiler, Grim, Parrish and Grim.

Dr. G. S. Gashwiler, of Novinger, reported concerning cadavers for dissecting purposes. After this report, it was moved and seconded that the society proceed to the election of officers for the ensuing year, the election resulting as follows: Dr. E. S. Quinn, of Kirksville, president; Dr. Janet Reid, of Kirksville, vice-president; Dr. Bert Parrish, of Kirksville, secretary-treasurer; Dr. J. R. Butler, of Kirksville, censor.

After the election of officers, communications from the Physicians' National Board of Regents, concerning registration of nurses, were read, and the secretary was instructed to send a list of the eligible nurses in the county.

Dr. Gashwiler presented some ideas on public health and sanitation, which were well received by all present.

The motion was made and seconded that the president announce at each meeting the place to hold the following meeting. The next meeting of the society will be on the first Thursday in January, at 7 p. m., with Drs. Martin and Parrish.—BERT PARRISH, M. D., Secretary.

BOONE COUNTY MEDICAL SOCIETY.

The monthly meeting of the Boone County Medical Society was held at Centralia on December 13th.

Papers were read by Dr. A. R. McComas, of Sturgeon, on "Malignant Endocarditis;" Dr. Woodson Moss, of Columbia, on "Therapeutic Action of Digitalis and Strophanthus," and by Dr. A. W. Kampschmidt, of Columbia, on "Present Status of Serum Therapy."

Officers for the coming year were elected as follows: President, Dr. James Gordon, of Columbia; vice-president, Dr. Robinson, of Sturgeon; secretary, Dr. A. W. Kampschmidt, of Columbia.

CAPE GIRARDEAU COUNTY MEDICAL SOCIETY.

The Cape Girardeau County Medical Society held its regular monthly meeting at Cape Girardeau Monday, December 13, for the election of officers and transaction of any other business that might come up. Ten

members were present. The following officers were elected: President, Dr. G. B. Schultz; vice-president, Dr. Edward Moore; secretary, Dr. E. H. G. Wilson; treasurer, Dr. B. W. Hays; censor, Dr. D. H. Hope; state delegate, Dr. R. F. Wichterich. After reviewing the work of the year which showed that we did not take the interest in our work that we did in years previous, the new chairman suggested a program committee to get together and all work to make 1910 the banner year in our history.—E. H. G. Wilson, M. D., Secretary.

CASS COUNTY MEDICAL SOCIETY.

The Cass County Medical Society met at Harrisonville, December 9th. The president being absent, Dr. M. P. Overholser was called to the chair and presided during the meeting. The program was of special interest, and consisted of the following:

Quiz, "Valvular Lesions; Their Cause, Pathology and Diagnosis."

Paper, "Antibacterial Elements of the Blood Fluids and Therapeutic Immunization," by Dr. M. P. Overholser.

Paper, "Gonorrhea," by Dr. H. Jerard.

These papers were all well prepared, interesting and showed great study and ability in their preparation. The members present took part in a free discussion of each of them.

Drs. S. E. Barnes, of Chaffin; C. J. Dodd and J. U. Scott were elected to membership.

The election of officers for the year 1910 was as follows: President, Dr. J. S. Triplett; vice-president, Dr. M. P. Overholser; secretary-treasurer, Dr. H. S. Crawford; censor, Dr. H. S. Crawford; delegate, Dr. H. S. Crawford; alternate, Dr. H. Jerard.

The society decided to take up the post-graduate course of study, as outlined by Dr. John H. Blackburn, and at the next meeting, in February, will study the "Surgical Diseases of the Thorax," as outlined on page 4 of pamphlets, copies of which have been sent to the members.—H. S. Crawford, M. D., Secretary.

CLINTON COUNTY MEDICAL SOCIETY.

The Clinton County Medical Society held its regular annual business meeting in Plattsburg on December 7, 1909. The following members were present: Drs. Sturgis, Kay, Beers, Risley, Jones, Fulton, Gant, Rea, Steckman, McConkey. Dr. Essig, of Spokane, Wash., was a welcome visitor.

The following program was rendered: Dr. Fulton, "The Society and Ethics;" Dr. Essig, "The Work of the Society;" Dr. McConkey, "What This Society Needs."

The following officers were elected for 1910: Dr. Jno. Sturgis, Perrin, president; Dr. J. A. Franklin, Cameron, vice-president; Dr. C. M. McConkey, Lathrap, secretary-treasurer; Dr. C. H. Risley, Cameron, censor. The next meeting will be held in Cameron on January 4, 1910.—C. M. McConkey, M. D., Secretary.

GREENE COUNTY MEDICAL SOCIETY.

The Greene County Medical Society has held sixteen regular meetings and three special meetings during the year. In addition to its scientific program before the society there has been done a large amount of work along anti-tuberculosis and public sanitation lines. Dr. Tinsley Brown, President of the Missouri State Medical Association, and Dr. N. P. Wood, of Independence, Mo., have delivered public addresses on public health and on the tuberculosis question.

The special committee appointed to investigate the city water supply of Springfield, the members of which were Dr. Fortner, Dr. Farnsworth and Dr. Woody, have made a very thorough investigation of the situation and their recommendations for improvement have been adopted by the water company. The society meetings have been well attended and much interest taken by the members both in the regular and special work. —J. E. Dewey, M. D., Secretary.

HOWARD COUNTY MEDICAL SOCIETY.

The Howard County Medical Society met in regular session on December 14th, and elected the following officers for the ensuing year: President, Dr. W. B. Kitchen, Glasgow; first vice-president, Dr. T. C. Richards, Fayette; second vice-president, Dr. J. Y. Hume, Armstrong; secretary-treasurer, Dr. C. W. Watts, Fayette; censors, Drs. C. O. Lewis, V. Q. Bonham and A. W. Moore, of Fayette; delegate to the Missouri State Medical Association, Dr. J. Y. Hume, of Armstrong. Dr. W. Scott Thompson, of Armstrong, was chosen to act with the State Board of Health, and Dr. H. K. Givens, of Fayette, was appointed to assist in the enforcement of the Pure Food and Drug Law.—C. W. Watts, M. D., Secretary.

MONITEAU COUNTY MEDICAL SOCIETY.

The Moniteau County Medical Society met in regular quarterly session at Tipton, December 9th. The following members were present: Drs. J. H. Lang, J. B. Norman, J. P. Burke, H. C. Freudenberger, J. Robertson, W. R. Patterson, P. E. Williams and H. S. Marsh.

The scientific program consisted of a paper by Dr. H. S. Marsh, entitled, "The Diagnosis of Cardiac Lesions," and one by Dr. H. C. Freudenberger, entitled, "The Relation of the Family Physician to the Tuberculous Patient." Each of these papers brought out spirited and thoughtful discussion, which was engaged in by all doctors present.

Dr. Patterson had prepared a paper on "Medical Organization," which was not read because of lack of time to hear the paper.

This was the time for election of officers, and upon ballot the following were elected for the coming year: President, Dr. J. H. Lang; vice-president, Dr. H. S. Marsh; secretary and delegate, Dr. H. C.

Freudenberger; alternate, Dr. W. R. Patterson; treasurer, Dr. H. C. Klueber; censor, Dr. J. B. Stewart.

Moniteau County Medical Society is in the most prosperous condition it has been for many years, and all eligible physicians in the county are members.

The next meeting will be held in Tipton on the second Thursday of March, 1910.—H. C. FREUDENBERGER, M. D., Secretary.

STE. GENEVIEVE COUNTY MEDICAL SOCIETY.

The Ste. Genevieve County Medical Society held its annual meeting, Wednesday, December 8, 1909. Members present: Drs. Wilkins, Hertich, Kerlagon, Hinch and Lanning.

The application for membership of Dr. P. I. Aubuchon, of Bloomsdale, was read and tabled until next meeting, as per by-laws.

The written report of the society's successful prosecution of two so-called Weltner graduates, was made by Mr. C. J. Stanton, attorney for the society, as follows: During May, 1909, prosecution was begun against both, "by three informations charging offenses in three counts in each information; to-wit: 1. Practicing medicine without certificate from State Board of Health. 2. Attempting to treat and treating, the sick and others afflicted with bodily and mental infirmities, without certificate from State Board of Health. 3. Advertising themselves as being authorized to treat the sick and others, etc., without certificate from State Board of Health." In the Circuit Court at the recent October term, 1909, information No. 253, in which we were defendant, and No. 256, in which the other was defendant, were taken up by the court and disposed of as follows: "Trial by court upon agreed statement of facts. Finding of guilty on second and third counts. State dismissed as to third count and consents to judgment on second count only."

"Fine on second count assessed at $50.00. Judgment accordingly. Defendants paroled and conditioned on payment of costs."

The parole was granted at the request of our attorney and to hold good until either of defendants attempts again to violate the law as charged, in which event an execution will be "issued for the fine in each case assessed as hereinabove set out." "And, cases No. 254 and 255 are still pending, and will be diligently prosecuted should it be deemed necessary in the future."

Election of officers resulted in old officers being retained, viz.: Dr. F. E. Hinch, president; Dr. J. A. Wilkins, vice-president, and Dr. R. W. Lanning, secretary-treasurer; Dr. J. A. Wilkins, delegate; board censors, Drs. Kerlagon, Hertich and Lanning. Committee on Public Health and Legislation, Drs. Wilkins, Rutledge and Lanning.—R. W. LANNING, M. D., Secretary.

ST. JOSEPH-BUCHANAN COUNTY MEDICAL SOCIETY.

MEETING OF DECEMBER 8, 1909.

On account of the annual election of officers the third section of the Post-Graduate Course was postponed until the next meeting.

Dr. J. H. McCoy, chairman of the banquet committee, reported that the committee had arranged for the annual dinner at the Hotel Metropole, on the evening of December 18, to cost $3.00 per plate, explaining that the committee was unable to arrange for a satisfactory banquet at a less price. Upon motion the report of the banquet committee was accepted and its action ratified.

Dr. Gebhart reported that the tuberculosis committee had received its supply of Red Cross stamps, which are being placed on sale at all the drug stores and clubs. The matter of placing a pamphlet in the hands of the school children was still under consideration.

The secretary offered, as a suggestion, that the society hold weekly meetings after the first of the year, and continue the post-graduate work at three of the meetings, the remaining session to be a business meeting. Dr. Jacob Geiger reported that the trustees at the Ensworth Medical College had donated the use of the lower lecture room without charge for the coming year, and that weekly meetings would be held in this institution. Upon motion of Dr. Reynolds the offer was accepted to take effect in January.

The next order of business was the election of officers. Dr. Gebhart and Ballard were appointed tellers to collect the ballots. The election resulted as follows: President, Dr. C. R. Woodson; first vice-president, Dr. F. A. Ladd; second vice-president, Dr. L. S. Long; secretary, Dr. C. W. Fassett; treasurer, Dr. J. M. Bell; censor, Dr. O. B. Campbell; delegate, Dr. A. B. McGlothlan; alternate, Dr. H. S. Forgrave.—Chas. Wood Fassett, M. D., Secretary.

BOOK REVIEWS

Thornton's Pocket Medical Formulary. New (9th) edition. Containing about 2,000 prescriptions, with indications for their use. In one leather-bound volume. Price, $1.50 net. Lea & Febiger, Publishers, Philadelphia and New York, 1909.

A convenient book with the diseases arranged alphabetically for ready reference, including indications and annotations for a choice of the various formulæ, according to the condition to be met.

Clinical Treatises on the Symptomatology and Diagnosis of Disorders of Respiration and Circulation. By Prof. Edmund von Neusser, M. D. Authorized English Translation, by Andrew McFarlane, M. D. Part III., Angina Pectoris. New York: E. B. Treat & Co. 1909. Price, $1.00.

Drawing from his vast fund of clinical experience Prof. von Neusser is able to illustrate his views by means of a wealth of interesting cases, most of them drawn from the second medical clinic of Vienna, of which he is chief. The etiology, pathology, symptomatology, diagnosis, etc., are discussed in great detail but, of the 71 pages, a scant 2 are devoted to treatment. And indeed in the face of true angina pectoris we

are well-nigh helpless. A hope for the eventual production of a real causal therapy for this disease lies, he believes, in the future discovery of an antibody for the product of the adrenals, perhaps by means of the subcutaneous implantation of fragments of adrenal tissue.

Clinical Diagnosis and Treatment of Disorders of the Bladder, with Technique of Cystoscopy. By Follen Cabot, M. D., Professor of Genito-Urinary Diseases, Post-Graduate Medical School, New York, etc. Illustrated. New York: E. B. Treat & Co. 1909. Price, $2.00, prepaid.

The author's extensive experience in the treatment of disorders of the bladder is alone sufficient to attract attention to this volume and assure the reader that he will find, though in compact form, all necessary information in order to know the latest views in regard to these affections. All the various methods of diagnosis, including cystoscopy, and all the forms of treatment which have proved successful in personal experience, are described.

The Ophthalmic Year Book. Volume VI. Edited by Edward Jackson, A. M., M. D., Professor of Ophthalmology, University of Colorado; George E. DeSchweinitz, Professor of Ophthalmology, University of Pennsylvania, and Theodore B. Schneideman, Professor of Ophthalmology, Philadelphia Polyclinic. Published by the Herrick Book and Stationery Co., Denver, Colo. 1909.

Like its predecessors this volume contains a careful and complete digest of the literature of ophthalmology with an index of all the publications of the year 1908.

Progressive Medicine, Vol. IV., December, 1909. A Quarterly Digest of Advances, Discoveries and Improvements in the Medical and Surgical Sciences. Edited by Hobart Amory Hare, M. D., Professor of Therapeutics and Materia Medica in the Jefferson Medical College of Philadelphia. Octavo, 334 pages, with 35 engravings and a colored plate. Per annum, in four paper-bound volumes, containing over 1,200 pages, $6.00, net; in cloth, $9.00, net. Lea & Febiger, Publishers, Philadelphia and New York.

This volume of Progressive Medicine contains 334 pages. The contents, as is usual with this excellent periodical, comprises articles upon various subjects which are contributed by men who have had much experience in their respective specialties. Volume IV. contains chapters on Diseases of the Digestive Tract and Allied Organs, the Liver and Pancreas, by David L. Edsall, M. D.; Diseases of the Kidneys, by John Rose Bradford, M. D., F. R. C. P., F. R. S.; Surgery of the Extremities, Tumors, Surgery of Joints, Shock, Anesthesia, and Infections, by Joseph C. Bloodgood, M. D.; Genito-Urinary Diseases, by William T. Belfield, M. D.; Practical Therapeutic Referendum, by H. R. M. Landis, M. D.

Medical Sociology. A Series of Observations touching upon the Sociology of Health and the Relation of Medicine to Society. By James Peter Warbasse, M. D., Surgeon to the German Hospital, etc., New York. D. Appleton & Company, New York and London. 1909.

The author of this interesting book in its preface expresses the hope that it may help to break down the barriers between the physician and

the public, and interest the latter in the work of the former, and the former in the needs of the latter. It is hoped that these observations on the sociologic relations of medicine will help laymen, students of sociology, teachers and parents, to a better understanding of the meaning of medicine and its power to save; and that for the medical reader they may furnish some entertainment and instruction and strengthen his love for his profession.

The Physician's Pocket Account Book. By J. J. Taylor, M. D. Bound in full leather, 24 pages of practical instructions for physicians, 216 pages of accounts. Price $1 per copy; published by The Medical Council, 4105 Walnut street, Philadelphia, Pa.

This book is without a doubt the most complete and at the same time simple and thoroughly efficient account book that has ever been devised. Furthermore, it is absolutely legal and can be presented in any court of justice. It contains 24 pages of business instructions for physicians, which have been found very useful and correct in a long and varied practice, under the headings of "Importance of a due bill," "Fees," "Billing and collecting," "Cautions," "Statute of limitations," "Form for wills," "Dying declarations," "Saving and investing," "Instant treatment of poisoning," etc. Also an average Fee Bill which has been found to work out correctly in practice. The price of this book is only $1. Sample pages will be sent free upon request.

A Text-Book of Surgical Diagnosis. For Students and Practitioners. By Edward Martin, M. D., Professor of Clinical Surgery, University of Pennsylvania, Philadelphia. Very handsome octavo of 764 pages, with 445 engravings, largely original, and 18 full-page plates. Cloth, $5.50, net; Lea & Febiger, Philadelphia and New York.

This new work takes as its keynote the axiom that the simplicity and safety of surgical intervention are as a rule proportionate to timeliness in diagnosis. Another feature of the work is the recognition of the fact that as it is the general practitioner who usually sees a case first, he has both the opportunity and responsibility of determining when surgical treatment is required, and he should be qualified therefore. Though providing thus for what may be termed the man in the middle, Dr. Martin has written also for the men at the two extremes of the line, namely, the student and the practicing surgeon. Thus his work is one of great comprehensiveness. The illustrations are mostly original and are designed to emphasize the points of diagnostic importance. This holds true especially for a separate chapter devoted to the proper interpretation of *x*-ray pictures.

Organic and Functional Nervous Diseases. A Text-Book of Neurology. By M. Allen Starr, M. D., Ph. D., LL.D., Sc. D., Professor of Neurology, College of Physicians and Surgeons, New York; ex-President of the New York Neurological Society. Third edition, thoroughly revised. Octavo, 904 pages, with 300 engravings and 29 plates in colors or monochrome. Cloth, $6.00, net; leather, $7.00, net. Lea & Febiger, Philadelphia and New York, 1909.

In planning this new edition, the author has adapted the matter still more closely to the requirements both of students and practitioners. He has completely rearranged as well as thoroughly revised the work. The

trend of the entire work is distinctly practical, embodying as it does the knowledge gained by twenty-seven years devoted to this specialty. It covers all aspects, both medical and surgical, and the possessor of the work may feel assured that he has at hand the latest and most authoritative information in shape for application. It is elaborately illustrated.

A Text-Book on the Principles and Practice of Surgery. By George Emerson Brewer, M. D., Professor of Clinical Surgery in the College of Physicians and Surgeons, New York. Octavo, 908 pages, 415 engravings and 14 full-page plates; cloth, $5.00, net; leather, $6.00, net. Lea & Febiger, Philadelphia and New York, 1909.

To present a well proportioned exposition of modern surgery in a volume of less than a thousand pages requires that author combine broad knowledge, good judgment in determining what is really important, and a concise way of stating it. Both as a skilful surgeon and as a teacher in one of the leading colleges, Brewer knows his subject and how to present it. He frankly states that his first edition was uneven and not sufficiently complete, a fault readily corrected after having the entire book in print before him, instead of the manuscript only, as at first. The author has incorporated new matter to the extent of two hundred pages, and has correspondingly enriched the engravings and colored plates. It is interesting to note that the new process of color-photography direct from nature has been here employed for the first time in medical literature.

Systemic (Including Special) Pathology. By J. George Adami, M. D., and Albert G. Nicholls, M. A., M. D., F. R. S., Assistant Professor of Pathology in McGill University. In one octavo volume of 1082 pages, with 310 engravings and 15 colored plates. Cloth, $6.00, net. Lea & Febiger, Philadelphia and New York, 1909.

With his volume on general pathology, Professor Adami effectually disposed of the old opprobrium that English-speaking races borrowed or adapted their works on the subject from the Germans. The plan and execution of that volume were highly original, and established even more firmly, if possible, the author's reputation as the peer of any pathologist in the world. The immediate and widespread welcome extended to the book showed both the need for it and the highly developed intelligence of the profession in America.

The volume on general pathology explains the features common to all diseases, and so enables the authors of the completing volume on systemic or special pathology to cover in convenient compass the entire field of the individual diseases. The same easy and charming literary style, and the same tracing of cause and effect, give the reader the reasoning in a way he will not forget, and endow him with a mastery of his profession that will render him a better practitioner, no matter what his previous attainments may have been. The reputation already won by the first volume will render every reader anxious to possess its companion, and will set American medicine on an even higher plane, both of science and practice.

A Text-Book of Protozoölogy. By Gary N. Calkins, Ph. D., Professor of Protozoölogy in Columbia University, New York. Octavo, 349 pages, with 125 engravings and 4 colored plates. Cloth, $3.25, net. Lea & Febiger, Philadelphia and New York, 1909.

Protozoölogy has hitherto been relatively neglected, owing to the difficulty of cultivating the protozoa in artificial media. Recent methods having largely overcome this obstacle, it is to be expected that the amazing and fruitful growth exhibited in the study of the bacteria during the past two decades will be paralleled in the case of the protozoa, but in much less time. The rôle of certain of these animal germs as causes of disease is well established, and with it their importance in pathology, but they have also a useful purpose to serve in teaching biology and physiology, as they exhibit in the simplest form the manifold processes of the living organism, assimilation, respiration, excretion, irritability and fatigue, reproduction, fertilization and inheritance. In this compact work an authority of the first rank has prepared a text-book on the protozoa from a very broad point of view, so that it will serve students of biology and medicine, and answer the requirements of physicians as well.

Modern Medicine. Its Theory and Practice. In Original Contributions by American and Foreign Authors. Edited by William Osler, M. D., Regius Professor of Medicine in Oxford University, England; formerly Professor of Medicine in Johns Hopkins University, Baltimore; in the University of Pennsylvania, Philadelphia, and in McGill University, Montreal. Assisted by Thomas McCrea, M. D., Associate Professor of Medicine and Clinical Therapeutics in Johns Hopkins University, Baltimore. In seven octavo volumes of about 900 pages each, illustrated. Volume VI., Diseases of the Urinary System, of the Ductless Glands, of the Muscles, Diseases of Obscure Causation, Vasomotor and Trophic Disorders, Medical Aspects of Life Insurance. Just ready. Price per volume: cloth, $6.00 net; leather, $7.00 net; half morocco, $7.50 net. Lea & Febiger, Publishers, Philadelphia and New York, 1909.

The sixth volume of Osler's Modern Medicine, just off press, covers a very wide and important range of subjects, namely, the diseases of the urinary system, of the ductless glands, of the muscles, those of obscure causation, vasomotor and trophic disorders, and the medical aspects of life insurance. These diseases are all handled by specially competent men. John McCrae, of Toronto, begins the volume with two chapters on the kidney, followed by two on urinary anomalies and uræmia by Garrod, of London. Herrick, of Chicago, deals with all aspects of nephritis, as well as amyloid disease, and Thomas R. Brown, of Baltimore, considers pyogenic and tubercular affections of the kidney. Its medico-surgical aspects, from the pen of H. H. Young, of Baltimore, conclude this section. George Dock, formerly of Ann Arbor, and now of New Orleans, has written the entire section on the ductless glands. Longcope, of Philadelphia, considers Hodgkin's Disease; T. McCrae, of Baltimore, arthritis deformans; Dock, of New Orleans, osteomalacia; and D. J. McCarthy, of Philadelphia, astasia-abasia and adiposis dolorosa. Together with W. R. Steiner, of Hartford, McCarthy has written the section on muscular diseases. The editor, Dr. Osler, with his former colleague, C. P. Emerson, of Baltimore, handles the section on vasomotor and trophic disorders, and Charles Lyman Greene, of St. Paul, concludes with the medical aspects of life insurance.

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Allen, J. M., Liberty, Mo.
Alton, G. P., Gashland, Mo.
Ashley, M. A., Excelsior Springs, Mo.
Bogart, T. N., Excelsior Springs, Mo.
Diemer, F. E., Liberty, Mo.
Gaines, J. J., Excelsior Springs, Mo.
Goodson, W. H., Liberty, Mo.
Hill, E. C., Smithville, Mo.
Jones, H. S., Linden, Mo.
Lightfoot, Frank, Excelsior Springs, Mo.
Lowrey, E., Excelsior Springs, Mo.
Maltby, Burt, Liberty, Mo.
Matthews, F. H., Liberty, Mo.
Miller, E. H., Liberty, Mo.
Ralph, A. B., Orrick, Mo.
Rice, J. J., Kearney, Mo.
Rice, J. T., Excelsior Springs, Mo.
Rothwell, J. H., Liberty, Mo.
Rowell, H., Kearney, Mo.
Sevier, R. E., Liberty, Mo.
Suddarth, C. H., Smithville, Mo.
Wallace, W. S., Excelsior Springs, Mo.
Ward, T. J., Birmingham, Mo.
Woods, R. J., Smithville, Mo.
Wysong, W. L., Missouri City, Mo.

CLINTON COUNTY.

Franklin, J. A., Cameron, Mo.
Fulton, Frank, Plattsburg, Mo.
Gant, J. O. K., Plattsburg, Mo.
Gilleland, O. A., Cameron, Mo.
Kay, John, Perrin, Mo.
McConkey, C. M., Lathrop, Mo.
Mitchell, A. R., Mecca, Mo.
Peters, M. L., Cameron, Mo.
Porter, Wood K., Turney, Mo.
Rea, R. W., Plattsburg, Mo.
Rush, G. B., Lathrop, Mo.
Steckman, P. M., Plattsburg, Mo.
Sturgis, John, Perrin, Mo.

COLE COUNTY.

Aldridge, M. R., Jefferson City, Mo.
Bedford, S. V., Jefferson City, Mo.
Biesmeyer, L. F., Westphalia, Mo.
Bowles, S. A., Westphalia, Mo.
Chastain, C. W., Plattsburg, Mo.
Clark, A. W., Jefferson City, Mo.
Enloe, C. F., Jefferson City, Mo.
Ettmueller, Gustav, Jefferson City, Mo.
Hamlin, C. W., Bass, Mo.
Hill, J. S., Jefferson City, Mo.
Hiller, Frank B., Jefferson City, Mo.
Hough, C. P., Jefferson City, Mo.
Jones, J. F., Linn, Mo.
Leach, N. T., Elsten, Mo.
Leslie, Walter H., Russellville, Mo.
McDonald, Jefferson City, Mo.
Porth, J. P., Jefferson City, Mo.
Sneed, C. M., Jefferson City, Mo.
Son, E. R., Osage City, Mo.
Summers, J. S., Jefferson City, Mo.
Thorpe, J. L., Jefferson City, Mo.
Waterman, J. A., Jefferson City, Mo.

COOPER COUNTY.

Barnes, H. T., Pilot Grove, Mo.
Barnes, W. S., Pilot Grove, Mo.
Cordry, H. V., Boonville, Mo.

Elliott, W. H., Bunceton, Mo.
Evans, R. L., Boonville, Mo.
Fogle, R. L., Otterville, Mo.
Lionberger, J. R., Boonville, Mo.
Meredith, A. L., Wooldridge, Mo.
Monroe, A. E., Otterville, Mo.
Parrish, J. S., Pleasant Green, Mo.
Pendleton, Thomas O., Pilot Grove, Mo.
Quigg, H. D., Blackwater, Mo.
Rice, E. L., Otterville, Mo.
Smiley, F. R., Boonville, Mo.
Teel, S. M., Prairie Home, Mo.
Van Ravenswaay, C. H., Boonville, Mo.

DAVIESS COUNTY.

Brosius, W. L., Gallatin, Mo.
Clagett, O. F., Jamesport, Mo.
Cox, John L., Winston, Mo.
Doolin, L. R., Gallatin, Mo.
Dunham, J. D., Pattonsburg, Mo.
Hanna, D. F., Gallatin, Mo.
Jarrett, S. S., Pattonsburg, Mo.
Martin, C. P., Jamison, Mo.
Miller, R. R., Lock Springs, Mo.
Minnick, A. G., Lock Springs, Mo.
Smith, M. A., Gallatin, Mo.
Songer, H. E., Jamesport, Mo.
Waller, C. E., Altamont, Mo.
Wetzel, N. M., Jamison, Mo.

DE KALB COUNTY.

Clark, W. J., Maysville, Mo.
Crowson, Egbert, Stewartsville, Mo.
Evans, R. A., Amity, Mo.
Gale, W. S., Osborn, Mo.
Guinn, J. C., Clarksdale, Mo.
Reynolds, E. M., Union Star, Mo.
Saunders, L. E., Stewartsville, Mo.
Varner, A. O., Union Star, Mo.

DENT COUNTY.

Calhoun, D. S., Sligo, Mo.
Conoway, R. H., Mounce, Mo.
Craig, L. B., Salem, Mo.
Duncan, E. A., Salem, Mo.
Gordon, J. R., Bunker, Mo.
Lenox, W. M., Hobson, Mo.
McMurtrey, A. T., Salem, Mo.
Rudd, W. E., Salem, Mo.
Welch, J. C., Salem, Mo.

DUNKLIN COUNTY.

Baldwin, Paul, Kennett, Mo.
Beal, W. E., Malden, Mo.
Bond, V. H., Cotton Plant, Mo.
Chaney, J., Senath, Mo.
Drace, J. J., Kennett, Mo.
Ellis, B. L., Senath, Mo.
Finney, W. B., Kennett, Mo.
Hogue, J. A., Holcomb, Mo.
Hughes, W. G., Senath, Mo.
Rigden, T. J., Kennett, Mo.
Sharpe, J. B., Senath, Mo.
Sturgis, W. E., Kennett, Mo.

FRANKLIN COUNTY.

Au Buchon, Phillip I., Grubville, Mo.
Booth, H. A., Pacific, Mo.
Briegleb, Charles, St. Clair, Mo.
Brown, A. C., Moselle, Mo.
Dunigan, James P., Sullivan, Mo.
Eimbeck, A. F., New Haven, Mo.
Eimbeck, W. F., New Haven, Mo.
Fitzgerald, W. P., Gerald, Mo.
Hempker, W. H., Catawissa, Mo.
Hume, E. L., Bourbon, Mo.
Isbell, John, Washington, Mo.
Kitchell, W. E., St. Clair, Mo.
Lane, A., Sullivan, Mo.
McNay, A. L., Pacific, Mo.
Mankopf, B. E. New Haven, Mo.
Mattox, W. P., Sullivan, Mo.
May, H. A., Washington, Mo.
Owens, I. M., Beaufort, Mo.
Poppenhusen, H. A. C., Washington, Mo.
Reeves, George W., Japan, Mo.
Rusk, Earle McD., Villa Ridge, Mo.
Rusk, John A., Gray's Summit, Mo.
Smith, August A., Pacific, Mo.
Stierberger, E. A., Union, Mo.
Williams, Dave E., Pacific, Mo.

GASCONADE-MARIES-OSAGE COUNTY

Auf der Heide, Frederick, Drake, Mo.
Buechler, J. L. A., Freesburg, Mo.
Burgess, J. W., Belle, Mo.
Byler, W. F., Eldon, Mo.
Engelbrecht, John, Stonyhill, Mo.
Ferrell, John J., Owensville, Mo.
Ferrell, Wm. Rhodes, Bland, Mo.
Leach, Charles T., Feursville, Mo.
Radmacher, J. J., Meta, Mo.
Rickhoff, A. H., Chamois, Mo.
Seba, John D., Bland, Mo.
Seba, William Ezra, Leedey, Okla.
Spurgeon, Marion E., Red Bird, Mo.

GENTRY COUNTY.

Barger, J. N., Albany, Mo.
Brooks, W. W., Stanberry, Mo.
Crockett, J. A., Stanberry, Mo.
Landis, H. B., King City, Mo.
Lindley, E. R., Stanberry, Mo.
Martin, W. T., Albany, Mo.
Paulett, A. W., King City, Mo.
Whiteley, G. W., Albany, Mo.
Williams, C. M., Gentry, Mo.

GREENE COUNTY.

(All addresses Springfield, Mo., unless otherwise stated.)
Armstrong, A., Campbell St.
Barnes, G. W. Commercial St.
Bartlett, J. R., Commercial St.
Beers, E. G., Trimble, Mo.
Boyd, J. R., Merchants Nat. Bank Bldg.
Camp, W. A., Boonville St.
Carter, O. N., Republic, Mo.
Clark, J. W., Bois d'Arc, Mo.
Coffelt, T. A., Baker Bldg.
Cowen, H. K., Ash Grove, Mo.
Cox, Lee, South St.
Crane, T. V. B., Hinton Bldg.
Dewey, J. E., 406 Baker Bldg.
Doolin, T., Ash Grove, Mo.
Dorrell, G. B., Republic, Mo.
Elkins, C. B., East Side Square.
Evans, E. L., Hinton Bldg.
Farnsworth, D. B., South Walnut St.
Fortner, B. F., Hinton Bldg.
Fulbright, J. H., South St.
Fulton, C. E., Hinton Bldg.
Fuson, F. B., Hinton Bldg.
Hankins, C. C., Baker Bldg.
Hill, H. S., Commercial St.
Hogeboom, R. W., Frisco Hospital.
Kerr, U. F., Fink's Pharmacy.
Klingner, Thomas O., Commercial St.
Knabb, Enoch, Commercial St.
Lemmon, G. B., Hinton Bldg.
Matthews, J. C., South St.
Mayfield, M. H., Commercial St.
Miller, T. C., Ash Grove, Mo.
Moore, C. A., South Side Square.
Neff, J. B., Hinton Bldg.
Nixon, J. H., Colonial Hotel.
Oldham, J. D., South St.

Ormsbee, J. L., 1862 N. Blvd.
Patterson, W. P., Over Dalrymple Drug Co.
Peak, O. L., Commercial St.
Pipkin, R. L., South St.
Pursselley, W. L., Campbell St.
Ralston, J. P., East Side Square.
Rienhoff, William, Baker Bldg.
Ross, F. E., Fink's Pharmacy.
Ruyle, H. J., Baker Block.
Sherman, D. U., Over Dalrymple Drug Co.
Smith, Wm. M., Commercial St.
Standard, D. E., Commercial St.
Tefft, J. E., East Side Square.
Terry, N. F., Merchants Nat. Bank Bldg.
Tickle, S. W., Commercial St.
Tucker, C. A., Commercial St.
Williams, J. W., Hinton Bldg.
Williams, N. C., Hinton Bldg.
Willier, A. F., Commercial St.
Woody, C. E., Over Dalrymple Drug Co.
Wright, J. P., Hinton Bldg.

GRUNDY COUNTY.

Asher, J. A., Trenton, Mo.
Coon, D. W., Trenton, Mo.
Duffy, E. A., Trenton, Mo.
Fulkerson, W. D., Trenton, Mo.
Lowry, H. L., Tindall, Mo.
Moore, T. E., Trenton, Mo.
Porterfield, Daniel, Trenton, Mo.
Sheldon, Samuel, Trenton, Mo.
Stone, John M., Laredo, Mo.
Sutton, Bertha E., Trenton, Mo.
Thompson, A. W., Galt, Mo.
Winnigham, W. H., Trenton, Mo.
Wright, J. B., Trenton, Mo.

HARRISON COUNTY.

Brewer, Lake, Ridgeway, Mo.
Broyles, F. H., Bethany, Mo.
Bryson, E. H., Bethany, Mo.
Delong, S. W. Tingley, Iowa.
Delong, W. B., Brooklyn, Mo.
Dunkerson, E. B. Hatfield, Mo.
Eades, M. H., New Hampton, Mo.
Gwinn, G. E., San Antonio, Tex.
Morrway, J. H., Ridgeway, Mo.
Robertson, C. H., Eagleville, Mo.
Stewatt, B. S., Bethany, Mo.
Vandivert, A. H., St. Joseph, Mo.
Wiley, W. H., Ridgeway, Mo.
Williams, A. W., Ridgeway, Mo.

HENRY COUNTY.

Allen, Clay, Blairstown, Mo.
Barr, Bernice B., Clinton, Mo.
Beaty, Joseph G., Huntingdale, Mo.
Berry, George W., Montrose, Mo.
Blackmore, Thomas A., Windsor, Mo.
Bradley, William P., Windsor, Mo.
Bronaugh, J. H., Calhoun, Mo.
Derwent, A. E., Clinton, Mo.
Douglass, F. M., Clinton, Mo.
Fewell, R. B., Montrose, Mo.
Gibbins, William H., Clinton, Mo.
Grady, L. C., Ladue, Mo.
Gray, A. A., Calhoun, Mo.
Gray, Thomas W., Leesville, Mo.
Griffith, C. E., Windsor, Mo.
Haire, Robert D., Clinton, Mo.
Hampton, J. R., Clinton, Mo., R. F. D. No. 1.
Head, C. W., Windsor, Mo.
Howard, Corwin F., Deepwater, Mo.
Jennings, R. J., R. F. D. No. 17, Windsor, Mo.
Kunkler, J. E., Clinton, Mo.
McNees, A. Jackson, Clinton, Mo
Menees, G. W., Clinton, Mo.
Miller, J. M., Montrose, Mo.
Neeley, James E., Calhoun, Mo.
Peeler, Edwin C., Coal, Mo.
Poaque, S. A., Clinton, Mo.
Russell, J. J., Deepwater, Mo.
Shankland, Wm. M., Clinton, Mo.
Smith, L. L., Urich, Mo.
Taylor, C. D., Brownington, Mo.
Wallis, J. R., Clinton, Mo.
Wilson, J. S., Deepwater, Mo.
Woltzen, S. W., Urich, Mo.

HOLT COUNTY.

Bullock, F. E., Forest City, Mo.
Chandler, J. F., Forest City, Mo.
Davis, J. M., Craig, Mo.
Davis, T. O., Maitland, Mo.
Evans, C. L., Oregon, Mo.
Hogan, F. E., Bigelow, Mo.
Kaltenbach, E., Craig, Mo.
Kearney, Elmer, New Point, Mo.
Kelley, P. D., Craig, Mo.
McClanahan, J. W., Forbes, Mo.
Miller, Edgar, Santa Rosa, Mo.
Miller, E. M., Mound City, Mo.
Proud, W. C., Oregon, Mo.
Quigley, B. T., Mound City, Mo.
Tracy, J. C., Mound City, Mo.
Tracy, J. M., Mound City, Mo.
Williams, Ira, Maitland, Mo.
Wood, W S., Oregon, Mo.

HOWARD COUNTY.

Bonham, V. Q., New Franklin, Mo.
Champion, J. R., Hillsdale, Mo.
Fleet, J. B., New Franklin, Mo.
Gallemore, Guilford B., Fayette, Mo.
Gentle, Doke, New Franklin, Mo.
Givens, H. K., Fayette, Mo.
Hume, Joel Y., Armstrong, Mo.
Kitchen, W. B., Glasgow, Mo.
Lee, Charles H., Fayette, Mo.
Lewis, C. O., Fayette, Mo.
Richards, T. C., Fayette, Mo.
Thompson, W. Scott, Armstrong, Mo.
Watts, C. W., Fayette, Mo.
White, M. S., Shannondale, Mo.
Wood, J. T., Harrisburg, Mo.
Wright, U. S., Fayette, Mo.

HOWELL COUNTY.

Black, James D., South Fork, Mo.
Culp, J. C., Thayer, Mo.
Davis, J. C. B., Willow Springs, Mo.
Dixon, J. C. B., West Plains, Mo.
Eblen, Joseph L., Alton, Mo.
Evans, E. E., West Plains, Mo.
Johnson, James McB., West Plains, Mo.
Mitchell, E. H., Pottersville, Mo.
Nichols, D. J., West Plains, Mo.
Piles, T. C., Alton, Mo.
Rowe, H. J., Willow Springs, Mo.
Shuttee, H. C., West Plains, Mo.
Spears, R. S., West Plains, Mo.
Thompson, H. A., Lanton, Mo.
Thornburgh, A. H., West Plains, Mo.

IRON COUNTY.

Farrar, G. W., Ironton, Mo.
Gay, R. W., Ironton, Mo.
Marshall, Ira A., Ironton, Mo.
Martin, James, Pilot Knob, Mo.

JACKSON COUNTY.

(All addresses Kansas City, Mo., unless otherwise indicated.)
Adams, Noah, 407 Argyle Bldg.
Agin, Burroughs, S. W. Cor. 13th & Main.

Allbritan, J. W., 622 S. W. Blvd.
Anderson, H. C., 716 Shukert Bldg.
Armour, Wallace A., 3401 E. 12th St.
Atkins, Calvin, Independence, Mo.
Ayers, Samuel, 1208 Wyandotte St.
Ball, H. P., 203 Rialto Bldg.
Beattie, T. J., 505 Shukert Bldg.
Beedle, Gordon A., 428 Altman Bldg.
Beil, J. Wallace, 311 Argyle Bldg.
Bellows, G. E., 429 Rialto Bldg.
Belove, Benjamin, 517 Shukert Bdg.
Berry, George F., 501 Rialto Bldg.
Binnie, J. F., 302 Argyle Bldg.
Blair, Edgar G., 404 Bryant Bldg.
Blakesly, T. S., 515 Commerce Bldg.
Block, J., 419 Argyle Bldg.
Bohan, P. T., 1208 Wyandotte St.
Boswell, A. C., 622 S. W. Blvd.
Bowman, Dora Emma, 327 Rialto Bldg.
Brainard, R. F., Martin City, Mo.
Brewster, R. B., 402 Argyle Bldg.
Brown, Charles A., 418 Keith & Perry Bldg.
Brown, Ralph A., 1304 E. 12th St.
Bruehl, J., 436 N. Ridge Bldg.
Brunig, F. H., 203 Metropolitan Ave.
Burke, C. L., 304 Deardorff Bldg.
Burkhardt, E. A., 622 S. W. Bldvd.
Burnett, S. Grover, 425 Rialto Bldg.
Burrill, C. W., 623 Shukert Bldg.
Callahan, Richard, 540 Cambridge Ave.
Campbell, Wm. L., 15th & Jackson Ave.
Capell, Clarence, 534 Rialto Bldg.
Carbaugh, Eugene, 430 Rialto Bldg.
Carey, W. E., St. Joseph, Mo.
Carter, J. W., 2407 Jackson Ave.
Carver, N. H., 2805 E. 12th St.
Castelaw, R. E., 424 Argyle Bldg.
Cathcart, C. P., 419 Deardorff Bldg.
Chambers, J. Q., 705 Shukert Bldg.
Chambliss, E. L., 523 Rialto Bldg.
Child, Scott P., 603 Bryant Bldg.
Clausen, James J., 424 Deardorff Bldg.
Clendening, Logan, 404 Bryant Bldg.
Coffey, W. H., 224 Bryant Bldg.
Coffin, Geo O., Ridge Bldg.
Coleman, H. B., 3105 E. 18th St.
Conover, C. C., 405 Argyle Bldg.
Cordier, A. H., 310 Rialto Bldg.
Crooks, O. R., 323 Rialto Bldg.
Cross, R. O., 317 Rialto Bldg.
Cross, W. M., City Hall.
Crowell, H. C., 211 Rialto Bldg.
Cunningham, O. J., 405 Altman Bldg.
Curdy, R. J., 301 Keith & Perry Bldg.
Curry, E. R., 304 Deardorff Bldg.
Dailey, Forrest W., 415 Argyle Bldg.
Dannaker, C. A., 637 Woodland Ave.
Davis, A. W., 3303 Woodland Ave.
Davis, E. T., 2634 S. Myrtle.
Davis, George W., 12th & Central.
Davis, S. J. T., 304 Deardorff Bldg.
DeLamater, H., 3448 Brooklyn Ave.
DeVilbiss, E. F., 2806 Harrison St.
Dod, F. L., 4646 Troost Ave.
Donaldson, George H., 3956 Wyandotte St.
Donaldson, J. E., 3940 Broadway.
Dove, O. H., 413 Rialto Bldg.
Drake, N. A., 1001 Harrison St.
Dunham, S. A., 312 Shukert Bldg.
Eldredge, James, 308 E. 10th St.
Eubank, A. E., 3021 S. W. Blvd.
Evans, F. H., Cor. Independence & Forrest Aves.
Faires, O. P., 1300 E. 8th St.
Field, Thomas, 18th & Prospect.
Field, W. S., 720 Shukert Bldg.
Florian, Albert J., 920 Holmes St.
Foster, Hal, 402 Altman Bldg.
Fowlston, John, 405 Argyle Bldg.
Frankenberger, J. M., 534 Rialto Bldg.
Freyman, A. A., 1201 Independence Ave.
Freyman, J., 1201 Independence Ave.
Frick, William, 409 Rialto Bldg.
Frick, W. J., 415 Keith & Perry Bldg.
Froehling, F. W., 920 Holmes St.
Frye, A. G., 30th & Charlotte.
Fryer, B. E., 520 E. 9th St.
Fulton, Andrew L., 3338 Broadway.
Fulton, C. M., 210 Argyle Bldg.
Gaines, J. W., 406 Rialto Bldg.
Gayle, V. W., 204 Deardorff Bldg.
Gilmor, Wm. L., Mt. Washington, Mo.
Gist, W. L., 311 Argyle Bldg.
Goldman, Max, 309 Century Bldg.
Gosney, G. W., 310 Rialto Bldg.
Green, J. W., Independence, Mo.
Greenlee, A. R., 3510 E. 12th St.
Griffith, A. C., 522 Rialto Bldg.
Griffith, J. D., 522 Rialto Bldg.
Guffey, Don Carlos, 605 Bryant Bldg.
Hall, C. Lester, 525 Bryant Bldg.
Hall, D. Lawton, 525 Bryant Bldg.
Hall, Frank J., 422 Argyle Bldg.
Hall, G. C., Lee's Summit, Mo.
Hall, J. R., 307 Altman Bldg.
Hammil, George F., Mo. Pacific Hospital.
Hamilton, B. G., 24th & Elmwood.
Hamilton, H. D., 31st & Woodland Ave.
Hanawalt, H. O., 312 Shukert Bldg.
Hanna, M. A., 515 Commerce Bldg.
Hardin, C. B., 413 Rialto Bldg.
Harrelson, N. O., 515 Commerce Bldg.
Harrison, A., Lee's Summit, Mo.
Harrison, E. Lee, 36th & Kenwood.
Hayden, J. G., 309 Argyle Bldg.
Hearst, Allen L., Merwin, Mo.
Heitzman, C. W., 328 Argyle Bldg.
Henderson, James P., Rialto Bldg.
Henry, Frances J., 3203 Brooklyn Ave.
Herbst, Frank, 720 E. 9th St.
Hertzler, Arthur E., 402 Argyle Bldg.
Hetherington, E. M., 725 Bryant Bldg.
Hickerson, J. C., Independence, Mo.
Hill, Howard, 424 Argyle Bldg.
Hobbs, Arthur A., Raytown, Mo.
Hofman, O., Jr., 207 Argyle Bldg.
Holbrook, Ralph W., 415 Argyle Bldg.
Hollis, Luther T., 534 N. Ridge Bldg.
Horrigan, J. A., 3100 Main St.
Howard, Joseph W., 805 McGee St.
Hoxie, George Howard, 317 Argyle Bldg.
Hull, A. G., 3610 McGee St.
Hunt, J. E., 317 Argyle Bldg.
Hyde, B. C., Keith & Perry Bldg.
Irwin, Charles B., 210 Rialto Bldg.
Iuen, F. J., 1334 Grand Ave.
Iuen, W. C., 1334 Grand Ave.
Jackson, C. A., 231 Rialto Bldg.
Jackson, Jabez N., 425 Argyle Bldg.
Jacobs, Benjamin, 415 Argyle Bldg.
James, S. C., 419 Shukert Bldg.
Jerowitz, H. D., 1233 Grand Ave.
Johnson, Charles R., 231 Rialto Bldg.
Johnstone, P. A., 3340 Olive St.
Jones, K. P., 513 Commerce Bldg.
Kanoky, J. Phillip, 912 Walnut St.
Kelly, Eugene, 2018 Prospect Ave.
Kepner, John W., 908 Tracy Ave.
Kimberlin, Joseph W., 532 Altman Bldg.
King, W. Eugene, Victor Bldg.
Kistler, James R., 1120 Main St.
Klein, W. C., 523 Rialto Bldg.
Knox, Andrew C., 724 Bryant Bldg.
Kopf, A. J., 915 W. 17th St.
Krimminger, C. E., Independence, Mo.
Kuhn, H. P., 419 Keith & Perry Bldg.
Kuhn, W. F., Shukert Bldg.
Kyger, J. W., 815 E. 31st St.
Lahmer, Ira B., Walsenburg, Colo.
Lake, N. E., 1330 Summit St.
Lane, H. H., 622 S. W. Blvd.
Langsdale, John M., 508 Altman Bldg.
Lanning, J. H., 510 Commerce Bldg.
Lapp, J. G., 531 Rialto Bldg.
Laurenzana, D. A., 522 E. 5th St.
Laurenzana, Louis, 522 E. 5th St.
Leonard, H. O., 1115 Grand Ave.
Leonard, Ward H., 608 S. W. Blvd.
Lester, Charles H., 501 Bryant Bldg.
Lewis, James K., 429 Deardorff Bldg.
Lewis, Nanny P., 1219 Wyandotte St.
Lewis, Ned O., 602 Commerce Bldg.
Lichtenberg, Joseph, 428 Argyle Bldg.

Lieberman, B. A., 410 Argyle Bldg.
Logan, James E., 1208 Wyandotte St.
Look, H. H., 428 Altman Bldg.
Lowe, Frederick M., 430 Argyle Bldg.
Lowry, Walter J., 402 Hall Bldg.
Luscher, L. W., 205 E. 12th St.
Lyle, Halsey M., 311 Argyle Bldg.
Lynch, J. C., 16th & Grand Ave.
McAlester, A. W., Jr., 702 Bryant Bldg.
McArthur, A. W., 517 Shukert Bldg.
McBride, W. L., 625 Bryant Bldg.
McCall, H. B., 1424 Holmes St.
McCandless, O. H., 400 Argyle Bldg.
McCrea, Maggie L., 535 N. Ridge Bldg.
McDonald, Chett, 527 Rialto Bldg.
McDonald, Park, 527 Rialto Bldg.
McKee, Joseph W., 329 Rialto Bldg.
McKillip, O. L., 532 Altman Bldg.
McPherson, C. P., 515 Commerce Bldg.
McQuade, H. D., 210 Rialto Bldg.
McVey, Newton, 325 Rialto Bldg.
Mallett, E. Pierce, 302 Argyle Bldg.
Manko, Emanuel, 227 W. 12th St.
Mann, A. W., Oak Grove, Mo.
Mark, Ernest G., 309 Argyle Bldg.
Martin, Henry L., 601 E. 12th St.
Martin, J. C., 334 Rialto Bldg.
Mathias, Edward L., 210 Rialto Bldg.
Merriman, C. S., 2511 Forrest Ave.
Middleton, James, 412 N. Montgall.
Miller, Hugh, 705 Shukert Bldg.
Mitchell, John T., 510 Rialto Bldg.
Moennighoff, Fritz J., 513 Rialto Bldg.
Montgomery, W. E., 429 Rialto Bldg.
Morris, W. C., 315 Garfield Ave.
Morrow, C. J., 505 Bryant Bldg.
Morrow, W. F., 502 Altman Bldg.
Moses, J. E., 3739 Genesee St.
Mosher, George C., 605 Bryant Bldg.
Mott, J. S., 517 Rialto Bldg.
Murphy, Franklin E., 405 Deardorff Bldg.
Neff, Frank C., 523 Altman Bldg.
Newhouse, Standley, 452 Ridge Bldg.
Nixon, J. W., 517 Shukert Bldg.
Nixon, William A., Densmore Hotel.
Norberg, George B., 311 Argyle Bldg.
O'Connor, C., 13th & Campbell.
O'Donnell, Alfred, Ellsworth, Kas.
Ousley, J. W., 211 Argyle Bldg.
Overall, T. W., 422 Rialto Bldg.
Owens, M. J., 622 S. W. Blvd.
Parker, O. H., 12th & Central.
Pearse, H. E., 513 Rialto Bldg.
Perkins, John W., 423 Altman Bldg.
Pettijohn, N. J., 3416 Holmes St.
Phillips, E. T., 1019 Broadway.
Pinckard, C. G., 901 E. 8th St.
Pipkin, George P., 5520 Wayne St.
Pittam, J. Thomas, 1106 Broadway.
Porter, Allen L., Commerce Bldg.
Porter, D. R., 430 W. 10th St.
Pugsley, Fred N., 701 Highland Ave.
Punton, John, 532 Altman Bldg.
Ragan, R. C., Granview, Mo.
Ragsdale, T. J., Lee's Summit, Mo.
Rathbone, F. W., 3303 Woodland Ave.
Reed, William M., 422 Rialto Bldg.
Reiger, Earle, 1105 W. 24th St.
Reyling, F. E., 1004 Oak St.
Reynolds, W. T., 324 Shukert Bldg.
Rice, William, 402 Hall Bldg.
Richardson, Katherine B., 21 Clinton Pl.
Riegle, David H., 1432 Summit St.
Ritter, C. A., 704 Bryant Bldg.
Roberson, H. M., Mo. Pacific Hospital.
Roberts, J. L., 224 Argyle Bldg.
Robertson, J. Archie, 705 Shukert Bldg.
Robinson, Ernest F., 603 Bryant Bldg.
Robinson, John L., 502 Altman Bldg.
Rogers, Ford B., 402 Argyle Bldg.
Rogers, J. C., 403 Rialto Bldg.
Rosenwald, Leon, 409 Argyle Bldg.
Sanders, Frank L., 511 Shukert Bldg.
Sanders, St. Elmo, 419 Shukert Bldg.
Sandzen, Carl, 3601 Troost Ave.
Sawyer, J. F., 317 Rialto Bldg.
Sawyer, Thomas T., 4303 E. 15th St.
Schauffler, E. W., 317 Argyle Bldg.
Schauffler, Robert M., 317 Argyle Bldg.
Schutz, W. H., 712 Bryant Bldg.
Scott, J. N., 606 Commerce Bldg.
Sheley, O. C., Independence, Mo.
Sheldon, J. G., 405 Altman Bldg.
Shelton, W. A., 406 Argyle Bldg.
Sherer, J. W., 418 Argyle Bldg.
Shirk, Wm., 515 Commerce Bldg.
Shumate, D. L., 517 Shukert Bldg.
Singleton, J. M., 621 Commerce Bldg.
Skinner, Edward H., 621 Commerce Bldg.
Sloan, Robert T., 407 Rialto Bldg.
Smith, J. H., 426 Rialto Bldg.
Smith, Robert M., 203 E. 12th St.
Stephens, Nanny A., 817 E. 31st St.
Stevens, William W., 513 Rialto Bldg.
Stewart, Edward L., 1115 Grand Ave.
Stoffer, S. R., 3818 Independence Ave.
Street, St. Clair, 302 Argyle Bldg.
Strother, J. S., 418 Keith & Perry Bldg.
Sutton, R. L., 518 Commerce Bldg.
Swaney, A. G., Lee's Summit.
Switzer, Clyde, 12th & Troost.
Talbot, Ambrose, 203 Rialto Bldg.
Taylor, L. G., 429 Deardorff Bldg.
Tesson, N. A. G., 405 Argyle Bldg.
Thomas, A. W., Springfield, Mo.
Thompson, George B., 12th & Central.
Thompson, James, 207 Rialto Bldg.
Thompson, J. H., 402 Deardorff Bldg.
Thornton, T. R., Lee's Summit, Mo.
Thrailkill, E. H., 307 Rialto Bldg.
Tieman, T. G., 608 S. W. Blvd.
Tiffany, Flavel B., 805 McGee St.
Trask, C. D., 16th & Summit Sts.
Trimble, W. K., 3444 Prospect Ave.
Tureman, H. G., 625 Bryant Bldg.
Twyman, E. D., Independence, Mo.
Twyman, G. T., Independence, Mo.
Van Eman, Fred T., 412 Argyle Bldg.
Voegelin, Samuel, 436 N. Ridge Bldg.
Von Quast, E., 309 Century Bldg.
Wall, A. H., 334 Rialto Bldg.
Wedding, E. V., 2122 E. 15th St.
Welch, A. J., 434 Rialto Bldg.
Wever, J. S., 501 Bryant Bldg.
Wheeler, B. H., 424 Deardorff Bldg.
Wheeler, W. S., 204 E. 12th St.
Wherritt, H. P., Independence, Mo.
Willits, Wilmot C., 311 Argyle Bldg.
Wilson, Albert M., 906 Main St.
Wilson, C. E., 418 Keith & Perry Bldg.
Wilson, Dora Green, 420 Rialto Bldg.
Wilson, John, 720 Shukert Bldg.
Wolf, I. J., 203 Argyle Bldg.
Woods, D. L., 4 E. 10th St.
Wood, N. P., Independence, Mo.
Wooley, Paul V., 309 Argyle Bldg.
Zwart, B. H., 1019 Prospect Ave.

JASPER COUNTY.

Barnett, A. F., Walla Walla, Wash.
Bragdon, G. W., Reeds, Mo.
Carpenter, A. L., Carl Junction, Mo.
Chenoweth, L. C., Webb City, Mo.
Clark, A. B., Joplin, Mo.
Clark, J. W., Carterville, Mo.
Cummings, C. C., Joplin, Mo.
Donohoo, Phillip, Walla Walla, Wash.
Dickerson, H. N., Joplin, Mo.
Freeman, A. B., Joplin, Mo.
Gregg, A. M., Joplin, Mo.
Hall, Elizabeth, Carthage, Mo.
Harutun, M. B., Joplin, Mo.
Henry, M. B., Alba, Mo.
James, Robert Myles, Joplin, Mo.
Jeans, J. W., Prosperity, Mo.
Kelso, R. S., Joplin, Mo.
Ketcham, C. M., Carthage, Mo.
Kincheloe, M. B., Joplin, Mo.
Lanyon, W. H., Joplin, Mo.
Lucas, H. R., Miners Bank Bldg., Joplin Mo.
McAlister, N. E., Joplin, Mo.

McClure, G. W., Carterville, Mo.
McMichael, O. A., Denver, Colo., Box 558.
Mack, Mary L., Joplin, Mo.
Mallory, Wm. H., Joplin, Mo.
Matthews, L. I., Joplin, Mo.
Mays, G. I., Joplin, Mo.
Miller, G. W., Joplin, Mo.
Miller, S. H., Joplin, Mo.
Neff, R. L., Joplin, Mo.
Pifer, J. D., Joplin, Mo.
Post, W. B., Carthage, Mo.
Powers, Everett, Carthage, Mo.
Powers, H. C., Chitwood, Mo.
Shelton, M. C., Joplin, Mo.
Snyder, A. R., Joplin, Mo.
Spriggs, M. L., Joplin, Mo.
Steele, W. E., Carthage, Mo.
Taulbee, J. B., Joplin, Mo.
Taylor, Calvin B., Carthage, Mo.
Taylor, H. H., Joplin, Mo.
Wolfe, B. F., Jasper City, Mo., R. F. D. No. 5.

JEFFERSON COUNTY.

Bryan, G. G., De Soto, Mo.
Donnell, R. E., De Soto, Mo.
Farrar, W. H., De Soto, Mo.
Hensley, O. E., Pevely, Mo.
Jones, J. E., Hillsboro, Mo.
McNutt, I. N., Pevely, Mo.
Mockbee, G. M., Poplar Bluff, Mo.
Tidwell, G. W., De Soto, Mo.

JOHNSON COUNTY.

Aber, W. H., Montserrat, Mo.
Adcock, D. C., Warrensburg, Mo.
Adcock, J. A. B., Warrensburg, Mo.
Anderson, J. I., Warrensburg, Mo.
Anderson, John T., Warrensburg, Mo.
Bozarth, John R., Centerview, Mo.
Bradley, T. L., Warrensburg, Mo.
Case, Z., Warrensburg, Mo.
Crank, A. C., Pittsville, Mo.
Gilbert, E. H., Warrensburg, Mo.
Hall, O. B., Warrensburg, Mo.
Johnson, W. E., Warrensburg, Mo.
Murray, L. F., Holden, Mo.
Murray, Samuel A., Holden, Mo.
Ozias, Charles O., Warrensburg, Mo.
Park, Henry, Sweet Springs, Mo.
Parker, H. F., Warrensburg, Mo.
Porter, J. E., Knobnoster, Mo.
Rice, John M., Columbus, Mo.
Schofield, L. J., Warrensburg, Mo.
Schooley, R. C., Fayetteville, Mo.
Shy, D. E., Knobnoster, Mo.
Shy, M. P., Knobnoster, Mo.
Simpson, J. T., Holden, Mo.
Thompson, W. G., Holden, Mo.

KNOX COUNTY.

Brown, George, Edina, Mo.
Brown, L. S., Edina, Mo.
Jurgens, H., Edina, Mo.
Luman, T. E., Baring, Mo.
Northcutt, J. R., Knox City, Mo.
St. John, H. H., Edina, Mo.
Wilsey, A. R., Hurdland, Mo.

LACLEDE COUNTY.

Anderson, J. N., Mountain Grove, Mo.
Atchley, J. B., Lebanon, Mo.
Billings, J. M., Lebanon, Mo.
Casey, S. A., Lebanon, Mo.
Casey, T. H., Lebanon, Mo.
Hartley, L. D., Nebo, Mo.
Herbert, T. B., Lebanon, Mo.
Lendsay, J. W., Orla, Mo.
McComb, James, Lebanon, Mo.
McComb, J. A., Lebanon, Mo.
Resser, J. H. H., Conway, Mo.
Tinsley, J. H., Orla, Mo.
Ware, T. V., Lebanon, Mo.

LAFAYETTE COUNTY.

Braecklein, W. A., Higginsville, Mo.
Carthrae, Lewis, Corder, Mo.
Carthrae, Lewis, Jr., Corder, Mo.
Chalkley, A. J., Lexington, Mo.
Cope, J. Q., Lexington, Mo.
Fischer, J. G. W., Alma, Mo.
Fredendall, G. W., Lexington, Mo.
Fulkerson, J. J., Lexington, Mo.
Harwood, W. G., Dover, Mo.
Hoefer, E. A., Higginsville, Mo.
Lieser, F. D., Concordia, Mo.
Lissack, H. M., Lexington, Mo.
McLennan, T. A., Higginsville, Mo.
Mann, F. W., Wellington, Mo.
Mann, J. A., Wellington, Mo.
Moore, C. M., Corder, Mo.
Oetting, O. G., Concordia, Mo.
Payne, B. T., Lexington, Mo.
Payne, N. B., Lexington, Mo.
Porter, W. A., Higginsville, Mo.
Roberts, M. G., Lexington, Mo.
Ryland, C. T., Lexington, Mo.
Schneider, J. A., Concordia, Mo.
Schriemann, F., Concordia, Mo.
Watts, R. B., Napoleon, Mo.
Webb, W. C., Higginsville, Mo.
Williams, George, Fulton, Mo.

LAWRENCE-STONE COUNTY.

Andrews, J. P., Marionville, Mo.
Baird, Jesse P., Marionville, Mo.
Brown, O. H., Mt Vernon, Mo.
Burney, W. S., Miller, Mo.
Clark, S. M., Halltown, Mo.
Cottingham, Ira A., Ft. Worth, Tex.
Gravens, J. H., Marionville, Mo.
Doggett, F. C. R., Crane, Mo.
Fleming, J. B., Aurora, Mo.
Freeland, P. L., Pierce City, Mo.
Goodrich, E. E., Crane, Mo.
Gum, L. J., Lawrenceburg, Mo.
Harding, D. E., Aurora, Mo.
Harris, J. A., Mt. Vernon, Mo.
Henson, L., Galena, Mo.
Holmes, W. M., Marionville, Mo.
Huffman, D. M., Crane, Mo.
King, C. R., Crane, Mo.
Loveland, W. S., Verona, Mo.
Madry, A. H., Aurora, Mo.
Miller, Thomas D., Aurora, Mo.
Orrick, G. W., Mount Vernon, Mo.
Rodman, W. W., Pierce City, Mo.
Roseberry, E. C., Mt. Vernon, Mo.
Shelton, C. W., Mt. Vernon, Mo.
Smart, R. W., Crane, Mo.
Stevenson, F. S., Aurora, Mo.
Wade, E. E., Clever, Mo.
Wade, J. H., Ponce De Leon, Mo.

LEWIS COUNTY.

Brown, J. C., Lewistown, Mo.
Cole, Paul F., Steffenville, Mo.
Dunlop, H. E., Canton, Mo.
Ford, John, Williamstown, Mo.
Frame, C. N., Ewing, Mo.
Knight, George P., Benjamin, Mo.
McGlasson, T. F., Lewistown, Mo.
McKim, H. W., La Belle, Mo.
Schofield, R. B., Lewistown, Mo.
Shanks, C. O., Canton, Mo.
Wilson, R. E., La Belle, Mo.

LINCOLN COUNTY.

Moore, Wm. L., Truxton, Mo.

LINN COUNTY.

Adams, W. R., Laredo, Mo.
Brownfield, S. T., Brookfield, Mo.
Buck, U. G., Rothville, Mo.

Burke, Foster W., Laclede, Mo.
Burke, J. L., Laclede, Mo.
Clint, M. L., Meadville, Mo.
Cochran, B. F., Brookfield, Mo.
Dryden, U. C., Purdin, Mo.
Ellis, W. W., Marceline, Mo.
Epler, J. W., Bucklin, Mo.
Eure, J. B., Brookfield, Mo.
Fore, T. P., Brookfield, Mo.
Frazier, Leland, Marceline, Mo.
Haley, Robert, Brookfield, Mo.
Home, L. O., Linneus, Mo.
Howard, D. F., Brookfield, Mo.
Ingram, W. C., Browning, Mo.
Jenkins, C. E., Brookfield, Mo.
Johnson, H. C., Meadville, Mo.
Lane, J. W., Linneus, Mo.
Morris, R. H., Linneus, Mo.
Musgrove, W. H., Eversonville, Mo.
Nevins, James A., North Salem, Mo.
Oven, T. P., Brookfield, Mo.
Patrick, P. L., New Boston, Mo.
Polson, J. T., Laclede, Mo.
Pound, J. B., New Boston, Mo.
Pratt, H. H., Brookfield, Mo.
Putman, Ola, Marceline, Mo.
Putman, B. B., Marceline, Mo.
Ridings, O. H., Meadville, Mo.
Scott, W. B., Bucklin, Mo.
Shepherd, J. D., Meadville, Mo.
Standly, E. D., Linneus, Mo.
Standly, K. V., Brookfield, Mo.
Standly, Z. T., Laclede, Mo.
Stratton, C. D., Rothville, Mo.
Thompson, J. M., Meadville, Mo.
Whaley, R. W., Browning, Mo.

LIVINGSTON COUNTY.

Barney, Reuben, Chillicothe, Mo.
Batdorf, F. P., Farmersville, Mo.
Carpenter, George W., Utica, Mo.
Coon, Earle, Wheeling, Mo.
Girdner, W. M., Chillicothe, Mo.
Gordon, David, Chillicothe, Mo.
Grace, H. M., Chillicothe, Mo.
Graham, Thomas E., Chula, Mo.
Minor, James C., Chillicothe, Mo.
Murray, R. W., Ludlow, Mo.
Patton, C. W., Mooresville, Mo.
Piatt, K. S., Chillicothe, Mo.
Shelton, J. C., Chillicothe, Mo.
Simpson, A. J., Chillicothe, Mo.
Simpson, W. R., Chillicothe, Mo.
Stevens, B. N., Chillicothe, Mo.
Swope, W. A., Wheeling, Mo.
Tracy, L. E., Chillicothe, Mo.
Trimble, J. W., Chillicothe, Mo.
White, W. L., Chillicothe, Mo., R. F. D.

MACON COUNTY.

Allen, F. W., Kaseyville, Mo.
Bradley, W. E., Ethel, Mo.
Brewington, George F., Bevier, Mo.
Bulkley, C. H., La Plata, Mo.
Cambre, A. L., Atlanta, Mo.
Clements, E. B., Macon, Mo.
Dailey, F. B., Keota, Mo.
Drew, F. W., Ethel, Mo.
Foster, J. P., La Crosse, Mo.
Greenwood, T. M., Keota, Mo.
Halliburton, J. M., Atlanta, Mo.
Hooper, C. L., Ardmore, Mo.
Hunt, J. R., Callao, Mo.
Mason, L. O., Bevier, Mo.
Miller, A. B., Macon, Mo.
Miller, W. H., Macon, Mo.
Newton, H. O., La Plata, Mo.
Norris, T. J., Macon, Mo.
Pipkin, W. D., Excello, Mo.
Reagan, C. W., Macon, Mo.
Rowland, W. P., Bevier, Mo.
Salyer, C. E., Callao, Mo.
Tainter, P. R., Callao, Mo.
Thompson, L. M., Macon, Mo.
Watson, T. S., Bevier, Mo.
Welch, William A., Callao, Mo.

MADISON COUNTY.

Anthony, C. A., Fredericktown, Mo.
Barron, W. H., Mine La Motte, Mo.
Carr, G. M., Marquand, Mo.
Chattle, W. K., St. Louis, Mo.
Davis, C. U., Fredericktown, Mo.
Dines, G. L., Fredericktown, Mo.
Gale, F. W., Marquand, Mo.
Greenwood, G. H., Fredericktown, Mo.
Haley, O., Fredericktown, Mo.
Hull, Lafayette, Marquand, Mo.
Newberry, F. R., Fredericktown, Mo.
Nifong, William, Fredericktown, Mo.
Slaughter, S. C., Fredericktown, Mo.
Smith, J. K., Fredericktown, Mo.

MARION COUNTY.

Banks, H. L., Hannibal, Mo.
Basket, J. N., Hannibal, Mo.
Blue, A. B., Hannibal, Mo.
Bounds, E. H., Hannibal, Mo.
Bourn, J. J., Hannibal, Mo.
Bush, F. W., Hannibal, Mo., R. No. 2.
Chilton, J. C., Hannibal, Mo.
Chowning, Thomas, Hannibal, Mo.
Detweiler, A. J., Hannibal, Mo.
Dudley, C. R., Hannibal, Mo.
Farrell, J. J., Hannibal, Mo.
Glahn, C. P., Palmyra, Mo.
Goodier, R. H., Hannibal, Mo.
Guss, W. C., Hannibal, Mo.
Hays, W. H., Hannibal, Mo.
Hill, I. E., Hannibal, Mo.
Hornback, E. T., Hannibal, Mo.
Howell, J. S., Hannibal, Mo.
Paxon, C. E., Hannibal, Mo.
Primm, J. N., Hannibal, Mo.
Roselle, T. A., Palmyra, Mo.
Sanford, Silas, Palmyra, Mo.
Schmidt, R., Hannibal, Mo.
Smith, S. G., Hannibal, Mo.
Smith, U. S., Hannibal, Mo.
Waldo, E. E., Hannibal, Mo.
Winn, R. M., Hannibal, Mo.

MERCER COUNTY.

Bristow, G. M., Princeton, Mo.
Buren, C. R., Princeton, Mo.
Chesmore, H. P., Princeton, Mo.
Nally, H., Cainsville, Mo.
Pickett, C. P., Mercer, Mo.

MILLER COUNTY.

Allee, W. L., Eldon, Mo.
Allee, W. S., Olean, Mo.
Benage, J. I., Iberia, Mo.
Brockman, H. H., Eldon, Mo.
DeVilbis, Frank, Eugene, Mo.
Dickson, W. D., Tuscumbia, Mo.
Duncan, George W., Ulman, Mo.
Gilleland, J. L., Olean, Mo.
Kouns, D. H., Tuscumbia, Mo.
Leslie, Walter L., Russellville, Mo.
Shelton, E. C., Eldon, Mo.
Temple, J. W., Eldon, Mo.
Von Gremp W. A., Iberia, Mo.
Walker, G. D., Eldon, Mo.

MISSISSIPPI COUNTY.

Aldridge, R. P., Anniston, Mo.
Boggan, P. P., Fayetteville, Ark.
Chapman, A. W., Charleston, Mo.
Finley, F. L., Anniston, Mo.
Hamner, M. D., Bertrand, Mo.

Howle, W. P., Charleston, Mo.
Love, W. S., Bertrand, Mo.
Lynch, J. W., Charleston, Mo.
Martin, A. J., East Prairie, Mo.
Martin, S. P., East Prairie, Mo.
Ogilvie, R. K., Blodgett, Mo.
Pressnell, U. A., Charleston, Mo.
Pressnell, C. C., Charleston, Mo.
Ralls, E. J., Wyatt, Mo.
Reid, H. L., Charleston, Mo.
Wallace, G. R., Bertrand, Mo.

MONITEAU COUNTY.

Allee, E. M., Speed, Mo.
Bramel, H. W., McGirk, Mo.
Burke, J. P., California, Mo.
Crum, J. A., Marion, Mo.
Dearing, W. A., Jamestown, Mo.
Freudenberger, H. C., Clarksburg, Mo.
Gray, L. M., California, Mo.
Inglish, J. E., Bacon, Mo.
Klueber, H. C., California, Mo.
Koelle, J. W., Jamestown, Mo.
Lang, J. H., Centertown, Mo.
Latham, H. W., Latham, Mo.
Latham, L. L., Latham, Mo.
Marsh, Harry, Tipton, Mo.
Marsh, J. W., Tipton, Mo.
Norman, J. B., California, Mo.
Patterson, W. R., Tipton, Mo.
Popejoy, H. R., California, Mo.
Redmon, S. H., Tipton, Mo.
Robertson, J. M., Bunceton, Mo.
Stewart, J. B., Clarksburg, Mo.
Thorpe, A. V., Jamestown, Mo.
Wilson, G. S., Fortuna, Mo.

MONROE COUNTY.

Baker, C. M., Santa Fe, Mo.
Bell, W. T., Stoutsville, Mo.
Brown, J. E., Florida, Mo.
Cassidy, G. H., Tulip, Mo.
Duncan, Edward, Long Branch, Mo.
Furnish, J. A., Paris, Mo., R. F. D. No. 1
Hull, J. H., Monroe City, Mo.
Luesley, M. E., Madison, Mo.
McGee, D. W., Paris, Mo.
McMurry, M. C., Paris, Mo.
McNutt, W. B. A., Monroe City, Mo.
Miles, A. W., Monroe City, Mo.
Moss, F. M., Paris, Mo.
Nolan, M. R., Holliday, Mo.
Payne, H. C., Paris, Mo.
Ragsdale, G. M., Paris, Mo.
Shobe, H. G., Paris, Mo.
Southern, J. N., Monroe City, Mo.

MONTGOMERY COUNTY.

Cox, S. S., Wellsville, Mo.
Dunham, N. S., Wellsville, Mo.
Ford, H. W., Middleton, Mo.
Hudson, D. O., Montgomery City, Mo.
Hudson, E. A., Wellsville, Mo.
Jones, J. L., Jonesburg, Mo.
Muns, G. E., Montgomery City, Mo.
Nowlin, David, Montgomery City, Mo.
Revelle, C. A., New Florence, Mo.
Tinsley, E. W., Montgomery City, Mo.
Wheeler, W. M., High Hill, Mo.

MORGAN COUNTY.

Fry, Charles, Syracuse, Mo.
Gunn, A. J., Versailles, Mo.
Lutman, H. N., Versailles, Mo.
Short, J. L., Rolla, Mo.
Well, William, Versailles, Mo.
Woods, Peter George, Versailles, Mo.

NEW MADRID COUNTY.

Blackman, C. S., Parma, Mo.
Dawson, George, New Madrid, Mo.
Diggs, W. L., New Madrid, Mo.
Fakes, John David, La Forge, Mo.
Hollenbeck, T. S., Portageville, Mo.
Jones, E. E., Lilbourn, Mo.
Mayfield, Pinkney M., Portageville, Mo.
O'Bannon, Welton, New Madrid, Mo.
Phillips, F. L., Portageville, Mo.
Sibley, William Austin, Marston, Mo.
Timberman, John Harrison, Marston, Mo.

NEWTON COUNTY.

Benton, A. W., Neosho, Mo.
Bowers, Horace, Neosho, Mo.
Bridges, J. M., Diamond, Mo.
Brown, W. D., Newtonia, Mo.
Campbell, W. M., Seneca, Mo.
Chapman, U. S., Diamond, Mo.
Doty, E. C., Anderson, Mo.
Foster, H. F., Neosho, Mo.
Hancock, J. B., Newtonia, Mo.
Hodges, J. J., Granby, Mo.
Langley, J. W., Granby, Mo.
Lamson, J. W., Neosho, Mo.
Lamson, R. C., Neosho, Mo.
Maas, A., Neosho, Mo.
Porter, H. L., Seneca, Mo.
Roseberry, E. M., Neosho, Mo.
Weems, D. L., Neosho, Mo.
Wills, R. L., Neosho, Mo.

NODAWAY COUNTY.

Allen, A. B., Maryville, Mo.
Anthony, F. R., Maryville, Mo.
Barnet, A. D., Guilford, Mo.
Crowson, E. L., Pickering, Mo.
Cummins, K. C., Maryville, Mo.
Day, Hiram, Parnell, Mo.
Dean, J. W., Maryville, Mo.
Dean, C. G., Burlington Junction, Mo.
Dean, L. E., Maryville, Mo.
Fisher, A. T., Maryville, Mo.
Heryford, W. B., Pickering, Mo.
Hunterson, D. J., Parnell, Mo.
Johns, Gomer, Wilcox, Mo.
Koch, C. D., Maryville, Mo.
Larrabee, A. J., Barnard, Mo.
McClanahan, J. M., Guilford, Mo.
Moltzhan, E. T., Ravenwood, Mo.
Nash, C. A., Maryville, Mo.
Pierpoint, J. E., Skidmore, Mo.
Pollard, H. M., Barnard, Mo.
Ryan, F. M., Quitman, Mo.
Smith, D. G., Arkoe, Mo.
Stuckel, W. B., Clyde, Mo.
Todd, J. H., Maryville, Mo.
Wallace, W. E., Burlington Junction, Mo.
Wallis, F. C., Maryville, Mo.
Wallis, W. M., Jr., Maryville, Mo.
Wallis, W. M., Sr., Maryville, Mo.

PEMISCOT COUNTY.

Byers, H. T., Caruthersville, Mo.
Crowe, B. D., Caruthersville, Mo.
Granger, G. A., Steele, Mo.
Hudgings, M. H., Caruthersville, Mo.
Johnson, J. W., Hayti, Mo.
Luten, J. B., Caruthersville, Mo.
Mickie, T. A., Cooter, Mo.
Sharp, I. F., Cottonwood Point, Mo.

PETTIS COUNTY.

(All addresses Sedalia unless otherwise stated.)

Albers, E. A., Smithton, Mo.
Alderman, M. C., Porter Bldg.

Bishop, Wm. T., Hughesville, Mo.
Bohling, C., Maywood Hospital.
Campbell, A. J., 345 Cassidy Bldg.
Cartwright, C. P., Sedalia, Mo., R. F. D. No. 1.
Clabaugh, O. W., Green Ridge, Mo.
Cole, H. B., Maywood Hospital.
Collins, M. T., 219 Ilgenfritz Bldg.
Cowan, W. G., Carlsbad, N. M.
Dunlap, W. O., 108 W. Main St.
Dyer, D. P., Porter Bldg.
Evans, W. H., 420 S. Ohio St.
Ferguson, R. L., Green Ridge, Mo.
Ferguson, W. J., 321 S. Ohio St.
Garton, Avery M., Topeka, Kas.
Harris, B. W., Georgetown, Mo.
Hatton, O. F., Clifton Hill, Mo., R. F. D. No. 2.
Heaton, A. H., 109 W. 7th St.
Hubbard, J. D., Versailles, Mo.
Kelly, S. G., Ilgenfritz Bldg.
Knott, Minerva, 210 W. 6th St.
Love, J. G., Nevada, Mo.
McCann, J. P., La Monte, Mo.
McNeil, C. A., 302 Hoffman Bldg.
McNeil, G. E. M., K. & T. Hospital.
Mitchell, J. E., Lookout, Mo.
Mitchell, J. E., Hughesville, Mo.
Morley, Frank R., 5th & Engineer Sts.
Nasse, E., Rocky Ford, Colo.
Overstreet, W. C., 312 S. Ohio Ave.
Powers, John A., Dresden, Mo.
Prowell, J. D., Longwood, Mo.
Sands, M. L., Warsaw, Mo.
Simonds, Wallace, Katy Bldg.
Sutton, F. L., 504 S. Ohio Ave.
Titsworth, Guy, 306 Hoffman Bldg.
Trader, C. B., Brandt Bldg.
Walker, W. D., La Monte, Mo.
Wills, Wm. J., Sedalia, Mo.
Wood, E. A., Maywood Hospital.
Yancey, E. F., M., K. & T. Hospital.

PHELPS COUNTY.

Baysinger, S. L., Rolla, Mo.
Breuer, W. H., St. James, Mo.
Breuer, R. E., Newburg, Mo.
Burns, W. F., Newburg, Mo.
Johnson, R. L., Rolla, Mo.
Orrick, G. W., Mount Vernon, Mo.
Orrick, G. W., Rolla, Mo.
Reed, H. L., Beulah, Mo.
Rowe, S. B., Rolla, Mo.
Short, Martha, Rolla, Mo.
Smith, B. T., Newburg, Mo.

PIKE COUNTY.

Bankhead, C. L., Paynesville, Mo.
Bankhead, J. E., Clarksville, Mo.
Bartlett, E. M., Clarksville, Mo.
Biggs, M. O., Bowling Green, Mo.
Davis, J. D., Louisiana, Mo.
Dreyfus, J. W., Louisiana, Mo.
Edgell, O. K., Cyrene, Mo.
Guy, L. Paxton, Cyrene, Mo.
Kennedy, J. J., Frankford, Mo.
Pollard, W. H., Eolia, Mo.
Shotwell, Richard, Curryville, Mo.
Smith, C. A., Annada, Mo.
Tinsley, G. N., Bowling Green, Mo.
Turner, J. W., Louisiana, Mo.
Unsell, J. B., Louisiana, Mo.
Walters, F. E., Bowling Green, Mo.

PLATTE COUNTY.

Benham, C. E., Parkville, Mo.
Carter, J. J., Weston, Mo.
Chastian, C. H., Weston, Mo.
Clark, H. M., Platte City, Mo.
Coffey, G. C., Platte City, Mo.
Gardener, P. L., Walron, Mo.
Hale, J. M., Dearborn, Mo.
Herndon, A. S., Camden Point, Mo.
Hull, E., Camden Point, Mo.
Moore, M. A., Dearborn, Mo.
Naylor, Alva, Platte City, Mo.
Redman, Spencer, Platte City, Mo.
Shafer, F. M., Edgerton, Mo.
Shultz, J. W., Weston, Mo.
Smith, A. S. J., Dearborn, Mo.
Swaney, W. D., Linkville, Mo.
Willis, John, Farley, Mo.
Wilson, R. P. C., Platte City, Mo.

POLK COUNTY.

Brown, C. H., Fair Play, Mo.
Cossins, S. W., Morrisville, Mo.
Coy, John W., Fair Play, Mo.
Helm, J. A., Morrisville, Mo.
Hopkins, W. S., Bolivar, Mo.
Hunt, L. L., Fair Play, Mo.
Loafman, J. E., Bolivar, Mo.
Lyttle, James, Goodson, Mo.
McLaughlin, J. A., Aldrich, Mo.
Mitchell, A. P., Bolivar, Mo.
Meyers, W. T., Aldrich, Mo.
Paris, R. W., Morrisville, Mo.
Roberts, J. F., Bolivar, Mo.
Russell, R. Lee, Humansville, Mo.
Stufflebam, Andrew J., Humansville, Mo.
Wrinkle, T. D., Pittsburg, Mo.

PULASKI COUNTY.

Carter, W. C., Bois D'Arc, Mo.
Klostermann, H. W., Laquey, Mo.
McCully, James, Dixon, Mo.
Murphy, H. G., Richland, Mo.
Oliver, Evertt A., Richland, Mo.
Ragan, W. L., Richland, Mo.
Rayle, J. E., Crocker, Mo.
Rolens, L. E., Dixon, Mo.
Rolens, M. F., Dixon, Mo.
Sell, W. J., Waynesville, Mo.
Stebbins, N. I., Crocker, Mo.
Tice, L., Waynesville, Mo.

PUTMAN COUNTY.

Carryer, Carl H., Unionville, Mo.
Giesinger, Edgar, Unionville, Mo.
Holman, Journey H., Unionville, Mo.
Montgomery, Enoch, Unionville, Mo.
Nulton, Ida May, Livonia, Mo.
Townsend, J. A., Unionville, Mo.

RALLS COUNTY.

Birney, W. L., Oakwood, Mo.
Birney, William P., Center, Mo.
Downing, T. J., New London, Mo.
Graves, C. H., Center, Mo.
Harwood, W. K., Rensselaer, Mo.
Hendrix, W. G., New London, Mo.
McCollum, R. W., Farber, Mo.
Monroe, Thomas, Laddonia.
Walter, Frederick, Perry, Mo.
Waters, W. T., New London, Mo.

RANDOLPH COUNTY.

Adams, S. C., Huntsville, Mo.
Ash, O. O., Moberly, Mo.
Bagby, B. H., Cairo, Mo.
Barnhart, D. A., Huntsville, Mo.
Bazan, L. A., Clark, Mo.
Bragg, G. G., Huntsville, Mo.
Clapp, C. B., Moberly, Mo.
Cottingham, T. A., Moberly, Mo.
Cuppaidge, G. O., Moberly, Mo.
Davidson, J. H., Higbee, Mo.
Dickerson, W. M., Renick, Mo.

Dutton, C. K., Moberly, Mo.
Hickerson, E. R., Moberly, Mo.
Johnson, G. A., Moberly, Mo.
Lyter, J. C., Moberly, Mo.
McCormick, F. L., Darksville, Mo.
Mabee, J. R., Huntsville, Mo.
Mangus, C. W., Moberly, Mo.
Mangus, T. D., Moberly, Mo.
Rafter, J. G., Huntsville, Mo.
Towles, S. P., Jacksonville, Mo.

RAY COUNTY.

Ball, J. E., Richmond, Mo.
Clark, J. F., Rayville, Mo.
Cook, T. D., Rayville, Mo.
Crawford, M. E., Camden, Mo.
Ellis, L. E., Orrick, Mo.
Estill, W. G., Lawson, Mo.
Etherton, W. C., Camden, Mo.
Greene, L. D., Richmond, Mo.
Grimes, Marvin, Hardin, Mo.
Hamilton, R. L., Richmond, Mo.
Higdon, E. F., Richmond, Mo.
Joiner, G. W., Rayville, Mo.
Major, Hermon S., Hardin, Mo.
McGaugh, Elmer T., Richmond, Mo.
Rentfro, E. W., Rayville, Mo.
Reney, J. H., Lawson, Mo.
Sevier, Robert, Richmond, Mo.
Sheetz, Robert, Orrick, Mo.
Shotwell, C. B., Richmond, Mo.
Smith, George W., Henrietta, Mo.
Smith, James W., Richmond, Mo.
Stapp, J. H., Hardin, Mo.

RIPLEY COUNTY.

Bennie, W. D., Naylor, Mo.
Gossage, W. L., Fairdealing, Mo.
Hume, J. R., Doniphan, Mo.
Proctor, S. A., Doniphan, Mo.
Redwine, J. T., Doniphan, Mo.

SALINE COUNTY.

Gore, A. E., Marshall, Mo.
Gore, D. C., Marshall, Mo.
Hall, John, Napton, Mo.
Hall, J. R., Marshall, Mo.
Harris, J. E., Marshall, Mo.
Harrison, William, Marshall, Mo.
Howard, W. A., Slater, Mo.
Jarvis, W. M., Slater, Mo.
McGuire, M. S., Arrow Rock, Mo.
Manning, D. T., Marshall, Mo.
Owen, J. H., Sweet Springs, Mo.
Richart, G. A., Blackburn, Mo.
Ringen, A. H., Loving, N. M.
Spotts, B. M., Marshall, Mo.
Walker, E. N., Grand Pass, Mo.

ST. CHARLES COUNTY.

Baltzer, H. F. W., Cottleville, Mo.
Bitter, Carl, St. Charles, Mo.
Corley, H. N., St. Paul, Mo.
Dunn, Frank, St. Peters, Mo.
Dyer, John, Warrenton, Mo.
Foreman, Charles O., Warrenton, Mo.
Gossow, A. A., St. Charles, Mo.
Hardin, T. L., St. Charles, Mo.
Jackson, T. J., St. Charles, Mo.
Jenkins, J. M., St. Peters, Mo.
Johnson, Samuel, St. Charles, Mo.
Morgner, Omar, St. Charles, Mo.
Mudd, J. R., St. Charles, Mo.
Stumberg, B. K., St. Charles, Mo.
Tainter, Frank J., St. Charles, Mo.
Wentker, B. P., St. Charles, Mo.

ST. CLAIR COUNTY.

Bell, W. E., Osceola, Mo.
Cline, W., Appleton City, Mo.
Landaker, C. L., Collins, Mo.
Moorehouse, Emma, Appleton City, Mo.
Seevers, Ruth, Osceola, Mo.
Smith, R. J., Appleton City, Mo.
Stratton, C. S., Roscoe, Mo.
Williams, D. B., Osceola, Mo.
Wright, Leo S., Lowry City, Mo.

ST. FRANCOIS COUNTY.

Appleberry, R., Leadwood, Mo.
Barber, Moses B., Flat River, Mo.
Brand, Eli Thomas, Bonne Terre, Mo.
Dounwing, B. R., Farmington, Mo.
English, J. H., Farmington, Mo.
Evans, A. L., Bonne Terre, Mo.
Fleming, C. R., Farmington, Mo.
Haney, T. L., Flat River, Mo.
Harrison, J. F., Farmington, Mo.
Keith, F. L., Flat River, Mo.
Marshall, Albert, Bonne Terre, Mo.
Poston, Harry P., Bonne Terre, Mo.
Reece, W. C., Elvins, Mo.
Robinson, B. J., Farmington, Mo.
Smith, O. A., Farmington, Mo.
Topping, M. H., Flat River, Mo.
Weber, F. S., Flat River, Mo.
Williams, G. B., Flat River, Mo.
Woods, S. Elliott, Bonne Terre, Mo.

STE. GENEVIEVE COUNTY.

Hertich, C. J., Ste. Genevieve, Mo.
Hinch, F. E., Ste. Genevieve, Mo.
Kerlagon, C. C., Ste. Genevieve, Mo.
Lanning, R. W., Ste. Genevieve, Mo.
Moore, C., St. Marys, Mo.
Morgansteen, H. J., Weingarten, Mo.
Rutledge, G. M., Ste. Genevieve, Mo.
Shirley J. M., St. Marys, Mo.
Vessells, F. M., Perryville, Mo.
Whiteside, E. E., River Aux Vases, Mo.
Wilkins, J. A., St. Marys, Mo.

ST. LOUIS COUNTY.

Armstrong, C. L., Webster Groves, Mo
Armstrong, J. H., Kirkwood, Mo.
Baker, Marshall, Webster Groves, Mo.
Berry, J. M., Webster Groves, Mo.
Bracy, Rolla, Wellston, Mo.
Brossard, Pierre M., Maplewood, Mo.
Cape, L. W., Maplewood, Mo.
Carter, H., Webster Groves, Mo.
Coleman, H. T., Pattonville, Mo.
Dalton, Martin, Fenton, Mo.
Denny, R. B., Eureka, Mo.
Douglass, J. T., Ferguson, Mo.
Dunnavant, C. A., Kirkwood, Mo.
Gallagher, J. C., Valley Park, Mo.
Greensfelder, H., Kirkwood, Mo.
Guibor, F. E., Maplewood, Mo.
Jansen, N. N., Florissant, Mo.
Koch, O. W., Ballwin, Mo.
Loving, S. R., Centaur, Mo.
Maisch, August, Manchester, Mo.
Metcalf, N. E., Maplewood, Mo.
Miles, H., Webster Groves, Mo.
Mills, R. W., Webster Groves, Mo.
Moore, R. D., Central, Mo.
O'Brien, L. F., Sappington, Mo.
Pfister, J., Creve Coeur, Mo.
Pitman, J., Kirkwood, Mo.
Randle, Harry T., Clayton, Mo.
Reynolds, S. H., Maplewood, Mo.
Suddarth, J. B., Clayton, Mo.
Townsend, W. H., Maplewood, Mo.
Will, Samuel J., Jefferson Barracks, Mo.
Wyer, H. G., Kirkwood, Mo.
Zuppann, Charles, Ballwin, Mo.

ST. LOUIS MEDICAL SOCIETY.

(All addresses St. Louis, Mo., unless otherwise stated.)

Abeken, Frederick W., 3531 S. Broadway.
Albrecht, Franklin H., Humboldt Bldg.
Alexander, Robert D., Mo. Pacific Hospital.
Allison, Nathaniel, Humboldt, Bldg.
Allyn, Asa B., 5004 Arsenal St.
Alt, Adolf, 316 Metropolitan Bldg.
Althans, Carl, 2024 S. Jefferson Ave.
Ambrose, Olney A., 5125 Bartmer Ave.
Ameiss, Frederick C., 236 Vanol Bldg.
Amerland, J. Henry, 2739 Chippewa St.
Amos, Newton W., 3001 Olive St.
Amyx, Robt. F., 1943 N. 11th St.
Apperson, Edwin L., Linmar Bldg.
Atkins, Henry S., City Insane Asylum.
Atkinson, Robert C., 3002 Lafayette Ave.
Auf der Heide, Wm.D., 3101 Arsenal St.
Axline, James T., 4143 N. Newstead Ave.
Ayars, Treston R., 3901 Easton Ave.
Babcock, Bert W., 3432 Chippewa St.
Babler, Edmund A., 4826 Delmar Ave.
Bailey, Fred Warren, Grand & Wyoming.
Baker, Richard W., 83 No. Raymond, Pasadena, Cal.
Baker, William M., 5424 Easton Ave.
Ball, James Moores, 4500 Olive St.
Ball, Otho F., 603 Metropolitan Bldg.
Barck, Carl, Humboldt Bldg.
Barclay, Robert, 3894 Washington Blvd.
Bardenheier, F. G. Adolph, 525 Frisco Bldg.
Barker, William S., 1101 Tyler Ave.
Barnes, Algernon S., 6312 Washington Ave.
Barnes, Algernon S., Jr., 210 Mo. Trust
Barnes, Percival C., 6312 Washington Ave.
Barnes, Rollin H., 219 Metropolitan Bldg. Bldg.
Baron, Jules, 3357 California Ave.
Barr, Clarence M., 2845a Manchester Ave
Barrington, Richard L., 208 Old Custom House.
Bartlett, Willard, 4257 Washington Blvd.
Bassett, Samuel T., 5735 Page Ave.
Bauduy, Jerome K., 340 N. Spring Av.
Bauer, Charles E., 2104 N. 14th St.
Baumgarten, Gustav, Humboldt Bldg.
Baumgarten, Walter, Humboldt Bldg.
Becker, William H., 4743 Labadie Ave.
Beckham, Genevieve S., 401 Century Bldg.
Bedal, Adelheid C., 3447 Lafayette Ave.
Behrens, Louis H., 301 Times Bldg.
Benker, Oscar H., 3618 S. Jefferson Ave.
Bennett, Floyd W., 2837 Park Ave.
Benson, Benjamin G., 2136 Benton St.
Bewig, Henry W., 802 Salisbury Ave.
Bishop, Frances L., 4271 Washington Ave.
Black, William D., 219 Metropolitan Bldg.
Blair, Vilray P., 405 Metropolitan Bldg.
Blattner, Fred O., 233 S. Jefferson Ave.
Bles, Victor A., 733 Metropolitan Bldg.
Bleyer, Adrien S., 705 N. Kingshighway.
Bliss, Malcolm A., Humboldt Bldg.
Bock, Arminius F., 1109 N. Grand Ave.
Boehm, Joseph L., 8th & Morgan Sts.
Boemler, George, 1922 St. Louis Ave.
Boggs, John D., 817 N. 18th St.
Boisliniere, Louis C., 3561 Olive St.
Bond, H. Wheeler, 17 Vandeventer Pl.
Bond, Young H., 325 N. Grand Ave.
Bonnot, Edmond, 3013a Park Ave.
Boogher, Frank K., Cor. High & Carr.
Boogher, J. Leland, 512 Mo. Trust Bldg.
Booth, David S., 426 Metropolitan Bldg.
Borck, Edward, 3928 N. 20th St.
Bosse, Edwin H., 1023 N. Grand Ave.
Bostick, William, Marquette Hotel.
Botts, McDowell, Frisco Hospital.
Bradley, Arthur H., 619 Metropolitan Bldg.
Bradley, John M., 2329 Montgomery St.
Brady, Jules M., 1467 Union Blvd.
Brandenburger, Louis A., 2900 Eads Ave.
Briggs, Guy Young, 2758 Armand Pl.
Brookes, Henry S., 3557 Lafayette Ave.
Brooks, Frederick C., Cor. Grand & Lindell Aves.
Broome, G. Wiley, 4911 McPherson Ave.
Brown, Arthur C. F., 2924 N. Taylor Ave.
Brown, John Young, 611 Metropolitan Bldg.
Bryan, William M. C., 18 Linmar Bldg.
Buchanan, James M., 721 N. Kingshighway.
Buhman, Rudolph, 5264 Page Ave.
Bunch, Rodney J., City Hospital.
Burdick, Jesse J., City Hospital.
Burford, Cyrus E., 955 Hamilton Ave.
Burnett, Edwin C., 548 Century Bldg.
Burns, Robert, Lister Bldg.
Butler, Louie P., Maryland & Euclid Aves
Cadwallader, Isaac H., 919 N. Taylor Av.
Cale, George W., 12 Lennox Pl.
Calhoun, James G., 601 Metropolitan Bldg.
Calnane, John A., 5268 Maple Ave.
Cameron, Solon, 4552 Ashland Ave.
Campbell, Arthur V., 430 Globe Democrat Bldg.
Campbell, Given, 5165 Washington.
Campbell, Oliver H., 3542 Washington.
Cape, Leander W., 7396 Hazel Ave.
Caplan, Leo, Lister Bldg.
Carley, Harry D., 3332 Bell Ave.
Carman, Russel D., 4318 Olive St.
Carriere, Theodore L., 2128 St. Louis Ave
Carson, Gibbon W., 301 Century Bldg.
Carson, Norman B., Humboldt Bldg.
Chaddock, Charles G., Humboldt Bldg.
Charles, Joseph W., Humboldt Bldg.
Clapper, William L., 5004 Delmar Blvd.
Clark, E. Spencer, 3929 Ashland Ave.
Clarke, B. William, Vanol Bldg.
Clemens, James R., 416 Metropolitan Bldg.
Clopton, Malvern B., Humboldt Bldg.
Collasowitz, Albrecht, 1500 Chouteau Ave.
Connolly, Patrick D., 2556 N. Grand Ave.
Cook, George E., 1809 N. 9th St.
Cook, Jerome E., 4133 Laclede Ave.
Cooley, Edward L., 937 Hamilton Ave.
Cooney, Daniel C., 4205 Finney Ave.
Coughlin, William T., 403 Metropolitan Bldg.
Craddock, Frank, 3709 Olive St.
Crandall, George C., 4283 Olive St.
Creveling, H. Clay, Humboldt Bldg.
Crossen, Harry S., 308 Metropolitan Bldg.
Culp, Earl E., 2928 N. Vandeventer.
Cummings, Harry J., 219 Metropolitan Bldg.
Curtis, Arthur N., 4205 Virginia Ave.
Dalton, Henry C., 1308a N. Grand Ave.
Dames, Alphonse F., 401 Metropolitan Bldg.
Davis, Louis H., 1030 Morrison Ave.
Davis, Robert H., Lister Bldg.
Davis, Wheeler, 5013a Page Ave.
Dean, John McH., 420 Metropolitan Bldg.
DeMenil, Henry N., 1009 LeMay Ferry Rd.
Deutsch, Wm. S., 307 Lister Bldg.
De Vorkin, Moses I., 7th & Franklin Ave.
Dixon, Charles H., Lister Bldg.
Dorsett, E. Lee, 5070 Washington Ave.
Dorsett, Walter B., Linmar Bldg.
Dorsey, Benjamin L., 1422 N. Taylor Ave.
Doyle, William J., 2312 Washington Ave.
Drake Geo. S., Jr., 3634 Washington Ave.
Drechsler, Louis, 2701 Blair Ave.
Drescher, Frederick B., 3860 S. Broadway.
Dudley, George F., 4043 McPherson Ave.
Duncan, John H., Humboldt Bldg.
Dutzi, August, 325 Soulard St.
Dwyer, Michael J., 822 S. Ewing Ave.

Eberelein, Edwin W., 1208 Dillon St.
Ehrenfest, Hugo, 626 Metropolitan Bldg.
Ehrhardt, Rudolph T., 301 Century Bldg.
Eidmann, Walter P., 3160 Morganford Rd.
Elbrecht, Oscar, Female Hospital.
Elmer, Warren P., 346 N. Boyle Ave.
Engelbach, William, Humboldt Bldg.
Engelmann, Oscar B., 2752 Chipepwa St.
Engman, Martin F., Humboldt Bldg.
Epstein, Meyer J., 4046 McPherson Ave.
Erdhaus, Henry B., 1206 Tamm Ave.
Esselbruegge, Frederick C., 3740 N. 11th St.
Ewing, Arthur E., 5956 Cabanne Ave.
Ewing, Fayette C., 450 Century Bldg.
Eyermann, Edward H., 3136 S. Grand Av.
Faber, John E., 2133 S. Jefferson Ave.
Fahlen, Fred, Humboldt Bldg.
Falk, John C., 4568 Page Blvd.
Farmer, Percival J., 4393 W. Pine Blvd.
Farrar, John O'F., Lister Bldg.
Ferrel, Henry E., Grand & Franklin.
Fichtenkam, Harry L., 1933 Lynch St.
Fienup, Theodore, 1401 S. Broadway.
Fisch, Carl, 3212 Pine St.
Fischer, Juniattus A., 5724a Easton Ave.
Fischer, Waldemar E., Linmar Bldg.
Fischel, Walter, Humboldt Bldg.
Fischel, Washington E., Humboldt Bldg.
Fleming, Albert W., 4137 Manchester Av.
Ford, W. Hutson, Washington, D. C.
Forster, Davis, 1115 Union Ave.
Forster, Otto E., 513 Carleton Bldg.
Foster, William H., 3553 Caroline St.
Foster, William H., 4065 Chouteau Ave.
Fowler, Samuel R., 509 Carleton Bldg.
Fox, Sylvester D., Missouri Pacific Hospital.
Frankenthal, Maurice A., 4163 McPherson Ave.
Frazer, Hal S., 1111 Chouteau Ave.
Freudenstein, Wm. H., 306 S. Ewing Ave.
Freund, Newton M., 1440 S. 18th St.
Friedman, Jacob, 308 N. 6th St.
Frielingsdorf, Edward H., 2202 S. Broadway.
Fries, William A., 1544 S. Broadway.
Fronske, Martin G., 2819 Wisconsin Ave.
Fry, Frank R., Humboldt Bldg.
Fuchs, Walter H., 3202 Lafayette Ave.
Fuhrmann, Richard H., 3221 California Ave.
Fulton, Arthur L., 617 Chouteau Ave.
Funkhouser, Robert M., 4354 Olive St.
Furney, Elliot E., 3417 Morgan St.
Garstang, D. Buie, Linmar Bldg.
Gauen, George O., 1518 N. Grand Ave.
Gayler, Wenzel C., 4101 Laclede Ave.
Gehrung, Eugene C., 1515 Grand St., Denver, Colo.
Geitz, Henry A., 3126 Washington Ave.
Gellhorn, George, Linmar Bldg.
Gettys, Henry B., 2601 Washington Ave.
Glaser, Martin J., 1825 S. Jefferson Ave.
Glasgow, Frank A., 3894 Washington Av.
Glennon, William P., 3603 Lindell Blvd.
Godfrey, George B., 900 S. 4th St.
Goebel, Arthur, 3508 Manchester Ave.
Goodman, Daniel C., 309 Century Bldg.
Goodwin, Edward J., 603 Metropolitan Bldg
Goldstein, Max A., 3858 Westminster Pl.
Gordon, Frank N., 1542 Mississippi Ave.
Gorin, M. George, 4225 W. Belle Pl.
Gradwohl, Rutherford B. H., 223 Victoria Bldg.
Graham, Isaac E., 4577 Page Ave.
Grant, John M., 536 N. Taylor Ave.
Graul, Henry P., 3353 Nebraska Ave.
Graul, John D., 3512 Crittenden St.
Graul, Robert E., 2905 Cherokee St.
Graves, Spencer C., Lister Bldg.
Graves, William W., 727 Metropolitan Bldg.
Gray, Isabel S., 5222a Delmar Ave.
Gray, Robert Q., Linmar Bldg.
Green, John, Jr., 625 Metropolitan Bldg.
Greer, Edward O., 2750 Park Ave.
Greiner, Theodore, 5443 Easton Ave.
Griffin, Patrick H., 4504 Easton Ave.
Grindon, Joseph, 3894 Washington Blvd.
Gross, Julius H., 306 Oriel Bldg.
Grosse, Louis W., 3665 Juniata St.
Grote, William F., 1225 Sullivan Ave.
Guggenheim, Louis K., 724 Metropolitan Bldg.
Guhman, Charles N., 4298 Finney Ave.
Guhman, John O., 4531 Washington Ave.
Guhman, Matthew G., 3505 N. Jefferson Ave.
Gundlach, Arthur, 2202 University St.
Haase, Moses E., 4263 W. Pine Blvd.
Habermaas, Albert, 3817 Cleveland Ave.
Hagerty, Meade E., Social Service Hospital.
Hall, Fred B., 204 Metropolitan Bldg.
Hall, Harry R., 5894 Cates Ave.
Hall, W. Antoine, 1597 Tower Grove Ave.
Hall, Willis, Humboldt Bldg.
Hallam, John C., 301 Mermod-Jaccard Bldg.
Hamel, A. H., 3519 Arsenal St.
Hangen, William M., 1050 Century Bldg.
Hanser, Herman A., 3651 Delmar Ave.
Hardaway, William A., 310 Lister Bldg.
Hardy, Joseph, 7620 S. Broadway.
Hardy, Wm. F., 2302 S. Jefferson.
Harlan, Warren E., 1719 Market St.
Harmann, Martin F., 3441 N. 9th St.
Harnisch, Henry J., 2407 S. 18th St.
Harral, Walter E., 6201 Etzel Ave.
Harrell, H. Jackson, 509 Metropolitan Bldg.
Harris, Downey L., 1426 Carroll St.
Harris, Rufus C., 1303 N. Garrison Ave.
Harscher, Andrew, 3559 Marine Ave.
Hartmann, Jacob A., 1228 S. Broadway.
Hartwig, Otto A., 219 N. 14th St.
Hauck, Eugene F., 1638 S. Jefferson Ave.
Hauck, Louis, 3555a Arsenal St.
Hawley, Nelson J., 3864 Cleveland Ave.
Hawley, Thomas S., 3065 Easton Ave.
Hempelmann, Louis H., 626 Metropolitan Bldg.
Henckler, Emil H., 3500 N. 14th St.
Henderson, Frank L., Humboldt Bldg.
Henke, August F., 2210 Howard St.
Hennerich, Joseph P., 2919 S. Broadway.
Henske, Andrew A., 1504 St. Louis Ave.
Henske, Andrew C., 3903 Easton Ave.
Herchenroeder, Louis, 2904 Park Ave.
Hermann, Henry W., 3654 Delmar Ave.
Herrick, Harold C., 5605a Easton Ave.
Heuer, Phillip J., Humboldt Bldg.
Heyer, Charles, 910 N. 10th St.
Hickman, Henry R., 3351 Jefferson Ave.
Higbee, Edward H., Jr., 416 Metropolitan Bldg.
Hill, Roland, 4605 Delmar Ave.
Hinchey, Frank, Humboldt Bldg.
Hirschi, William T., 2306 St. Louis Ave.
Hochdoefer, Daniel F., 3410 California Ave.
Hoeffer, John P., 2120 S. Grand Ave.
Hoffmann, Philip, 3337 Washington Ave.
Hoge, Moses W., 601 Metropolitan Bldg.
Holdenried, William E., 4507 Virginia Ave.
Holman, Richard S., 3951 Delmar Ave.
Holtgrewe, Frederick W., 1601 Blair Ave.
Homan, George, 323 Odd Fellows Bldg.
Hopkins, Milton J., 3558 Lindell Bl.
Hopkins, Ross, 1055 Hamilton Ave.
Hopkins, Thomas A., 319 Century Bldg.
Horwitz, Alexander E., 509 Metropolitan Bldg.
Horwitz, Maximillian R., 353 Century Bldg.
Houwink, Joseph J., 3505 Franklin Ave.
Huelsmann, Leo C., 2504 N. 14th St.
Hughes, Charles H., 518 Metropolitan Bldg.

Hughes, Marc Ray, 518 Metropolitan Bldg.
Humphrey, J. Harrison, 212 Ozark Bldg.
Hurford, Phelps G., 4196a Manchester Av.
Hyndman, Charles E., 4661 Maryland Av.
Hypes Benjamin M., 2005 Victor St.
Ilg, Theodore, 3150 South Grand Ave.
Iralson, Abraham, 6200 Columbia Ave.
Jacobs, Max W., 353 Century Bldg.
Jacobson, Henry, 301 Mo. Trust Bldg
Jacobson, Jacob, 5598 Bartmer Ave.
James, John A. J., 1006 Carleton Bldg.
Jarvis, N. W., 3616a Garfield Ave.
Jennings, J. Ellis, 508 Carleton Bldg.
Jennings, M. Dwight, 4101 Washington Ave.
Johnson, E. Horace, 2433 N. Grand Ave.
Johnson, Frank P., 3744 Finney Ave.
Johnson, Harry McC., Linmar Bldg.
Jonas, Ernst, 465 N. Taylor Ave.
Jones, Meredith D., 4068 Washington Bl.
Jungk, Carl W., 2249 S. Jefferson Ave.
Kane, R. Emmet, Humboldt Bldg.
Keber, John B., 127 Garden St., Prescott, Ariz.
Keeble, Robert R., 2747 Lafayette Ave.
Keehn, Gustav A., 2702 N. Grand Ave.
Kelley, Isaac D., Jr., 3858 Westminster Pl.
Kennedy, Walter U., 1121 Cass Ave.
Kern, John H., 3916 N. Grand Ave.
Kerwin, William, 1814 Locust St.
Kessler, Edward H., 3446 Shenandoah Av.
Kieffer, Alonzo R., 4268 W. Belle Pl.
Kier, William F., 3609 Lindell Blvd.
Kimball, Arthur C., Grand & Franklin Aves.
Kimbrough, John S., Humboldt Bldg.
Kirchner, Walter C. G., City Hospital.
Klein, Sebastian, 1921 N. Grand Ave.
Klenk, Charles L., 2105 S. Broadway.
Klie, Constantine M. T., 2429 Wren Ave.
Klie, G. H. Charles, 5100 N. Broadway.
Klinefelter, Marion L., 704 N. Taylor Ave.
Klokke, W. Emil, 1004 Century Bldg.
Koenig, George W., 740 S. 4th St.
Koetter, Albert F., 1023 N. Grand Ave.
Kolbenheyer, Frederick, 2006 Lafayette Ave.
Kollme, Otto, 2354 Park Ave.
Koontz, Carl J., 793 Aubert Ave.
Konzelmann, Paul R., 2500 S. Jefferson Ave.
Kouri, Martin F., 1041 S. Taylor Ave.
Krebs, Franz J. V., 1906 St. Louis Ave.
Krebs, George A., 2709 S. 11th St.
Krenning, William G., 4041a St. Louis Ave.
Kroeger, George B., 3622 Garfield Ave.
Krug, Frederick H., 2300 St. Louis Ave.
Kuhlmann, Frederick C. E., 2135 St. Louis Ave.
Kuhn, Daniel, 1746 Chouteau Ave.
Kurtzeborn, Edwin E., 4909 McPherson Ave.
Langan, William J., Plymouth and Goodfellow Aves.
Lare, Harry S. P., 4644 Morgan St.
Larew, John T., Olivia Bldg.
Lawrence, William Scott, 1913 N. Grand Ave.
Leavy, Charles A., 426 Metropolitan Bldg.
Leavy, John A., 4340 Morgan St.
Lebrecht, John C., 1509 Chouteau Ave.
Lee, Elbert J., 621 Wright Bldg.
Leggat, Abram C., 720 Metropolitan Bldg.
Leighton, William E., 346 N. Boyle Ave.
Lemen, Joseph R., Vanol Bldg.
Levy, Aaron, 4500 Olive St.
Lewis, Bransford, 1050 Century Bldg.
Lewis, Charles, 1312 Monroe Ave.
Lightner, Calvin R., 716 Metropolitan Bldg.
Link, Joseph J., 212 Metropolitan Bldg.
Lippe, Meyer J., 5349 Maple Ave.
Lipsitz, Samuel T., 4315 Page Ave.
Loeb, Clarence, Humboldt Bldg.
Loeb, Hanau W., Humboldt Bldg.
Loeb, Virgil, Humboldt Bldg.
Loewenstein, Harry M., 2615 N. Taylor Ave.
Loftus, William V., 5904 Minerva Ave.
Long, Joseph M., 513 N. Sarah St.
Luedde, William H., 314 Metropolitan Bldg.
Luhn, Walter D., 3414 Oregon Ave.
Lund, Horluf G., 1050 Century Bldg.
Luton, Lionel S., 1023 N. Grand Ave.
Lutz, Frank J., 1630 S. Grand Ave.
Lyman, Harry W., 802 Carleton Bldg.
Lyon, George E., 732 Planters Hotel.
Lyon, Hartwell N., Humboldt Bldg.
McAmis, L. Clifford, Humboldt Bldg.
McBratney, Emmett W., 7619 South Broadway.
McCandless, Wm. A., 720 Metropolitan Bldg.
McClure, James, 1704 Market St.
McConnell, Guthrie, 4175 Washington Av.
McGann, Peter J., 4830 Easton Ave.
McKay, Harvey S., 3500 Pestalozzi St.
McLean, Mary H., 4339 Delmar Ave.
McLemore, Tipton, 205 Humboldt Bldg.
MacDonald, John W., 1111 N. Grand Ave.
Marchildon, John W., Laclede & Vandeventer Aves.
Mardorf, Wm. C., 3634 Shenandoah Ave.
Marks, Heine, Marina Bldg.
Marquardt, Arthur V., 522 Century Bldg.
Martin, Charles P., 4111 N. Grand Ave.
Martin, Tilly A., 426 Metropolitan Bldg.
Marx, Ella, 4269 Delmar Ave.
Max, Clarence O. C., 515 Metropolitan Bldg.
May, Albert, 1803 Morgan St.
Mayes, Joseph F., 1801 Olive St.
Meinhard, Joseph, 921 Chouteau Ave.
Meisenbach, A. Edward, 2343 Olive St.
Meisenbach, Albert H., 2618 S. Grand Ave.
Meng, Edwin R., 728 N. Taylor Ave.
Menkhaus, John B., 4607 Easton Ave.
Merz, Adolph, 3404 Cherokee St.
Muetze, Henry, 3201 Shenandoah Ave.
Meyer, Alfred H., 4624 Virginia Ave.
Meyer, Harry H., 1823 N. Taylor Ave.
Meyer, Jesse, 3894 Washington Blvd.
Millar, Reginald C. M., 4344 Easton Ave.
Miller, H. Edward, 2257 Missouri Ave.
Miller, John J., 4439 Morgan St.
Miller, Robert F., 318 Frisco Bldg.
Miller, W. Jackson, 307 Humboldt Bldg.
Missimore, Louis E., 4869 Page Ave.
Moeller, Carl E., 1419 S. 7th St.
Mook, William H., Humboldt Bldg.
Moore, Bernard W., 3634 Washington Ave.
Moore, Harry M., Linmar Bldg.
Moore, John W., 906 Pine St.
Moore, Orbun T., 1272 Hamilton Ave.
Moore, Sherwood, 3634 Washington Ave.
Moore, William G., 86 Vandeventer Pl.
Morfit, John C., Humboldt Bldg.
Morrell, M. Pinckney, 3693 Olive.
Morris, Christopher, 2945 Franklin Ave.
Mosby, Charles V., 713 Metropolitan Bldg.
Mudd, Harvey G., Humboldt Bldg.
Mudd, Leo C., 5579 Easton Ave.
Mueller, Ernst H., 3548 Arsenal St.
Mueller, George L., 1125 Madison St.
Munsch, Augustin P., 4637 Easton Ave.
Munsen, Charles L., 731 S. Broadway.
Murphy, John C., 4263 Morgan St.
Murphy, R. Brent, 6120 Victoria St.
Myer, Max W., 4439 Washington Blvd.
Myerdick, Albert H., 4116a Lee av
Nash W. Hampton, 405 Commercial Bldg.
Nelson, Edwin M., 965 Hamilton Ave.
Neuhoff, Fritz, 1318 Chouteau Ave.
Neville, Eugene J., Linmar Bldg.
Newman, Louis E., Humboldt Bldg.
Newman, Samuel E., 4323 Laclede Ave.
Nicholson ,Clarence M., 4500 Olive St.
Nicks, Harry G., 933a Goodfellow Ave.
Niebruegge, Henry J., 2003 Salisbury St.

Nietert, Herman L., 522 Century Bldg.
Norris, Edwin J., 4223 Russell Ave.
North, Emmett P., 2124 S. Grand Ave.
North, William R., 86 Vandeventer Pl.
Oatman, Louis J., 509 Metropolitan Bldg.
Oehler, Emanuel F., 4161a St. Louis Ave.
Ogle, Oliver L., 2625 St. Louis Ave.
O'Keefe, James J., 1011 N. Leffingwell Ave.
O'Reilly, Archer, 423 Metropolitan Bldg.
O'Reilley, Robert J. 1107 N. Grand Ave.
Orth, Carl, 1437 Penrose St.
Outten, Warren B., Mo. Pacific Hospital.
Owen, William C., 3846 Folsom Ave.
Padberg, Louis R., 3509 Arsenal St.
Paine, George F., 802 Carleton Bldg.
Park, George M., 5352 Page Ave.
Parker, Chas. W., 3502 N. Jefferson Ave.
Parker, Frederick P., 1423 Euclid Ave.
Parman, David R., 4473 Delmar Ave.
Parsons, Scott E., 4052 Washington Ave.
Patton, Fred W., 5617 Maple Ave.
Pfingsten, C. Frederick, 208 Lister Bldg.
Phillips, George M., 406 Commercial Bldg.
Pierce, Harry M., 4046 N. Grand Ave.
Pitzman, Marsh, 1900 S. Compton Ave.
Pohlman, Frederick L., 2202 N. Market St.
Poignee, Frank P., 917 Hickory St.
Pollmann, Ludwig P., 2002 St. Louis Ave.
Pollmann, Walter H., 2002 St. Louis Ave.
Pope, Charles H., 1557 S. Jefferson Ave.
Pope, Sherman, 2959 Gamble St.
Porter, William, 3886 Washington Ave.
Porterfield, Elmo P., Humboldt Bldg.
Post, M. Hayward, 5371 Waterman Ave.
Potts, Jerome D., 518 Metropolitan Bldg.
Powell, Charles H., 804 Victoria Bldg.
Powell, Ignatius W., N. E. Cor. Grand & Easton Aves.
Prinz, Herman, 602 Century Bldg.
Raithel, G. Herman, 2901 St. Louis Ave.
Rassieur, Louis, 315 Metropolitan Bldg.
Ravold, Amand, 1208 Chemical Bldg.
Reber, Lee W., 1726 S. 12th St.
Reber, Robert L., 1837 S. 11th St.
Reder, Francis L., 4629 Cook Ave.
Reed, Elizabeth B., Lister Bldg.
Rehfeldt, Charles S., 2255 S. Jefferson Ave.
Reim, Hugo W., 3904 Folsom Ave.
Reinders, Otto W., Mercantile Tr. Co.
Reinhardt, Gustav H., Address unknown.
Remme, Chas. T., 400 S. 14th St.
Rice, D. Frank, 5145 Cabanne Ave.
Richter, Edward, 7310 Michigan Ave.
Richter, George, 3538 Humphrey St.
Riesmeyer, Louis T., 2838 Lafayette Ave.
Riley, Cassius M., Alton, Ill.
Riley, Ralph D., 4641 Washington Ave.
Ring, Frank R., 619 Chemical Bldg.
Robertson, William M., Humboldt Bldg.
Robinson, Anselm C., 5083 Westminster Pl.
Rohlfing, Arthur H., 3543 California Ave.
Rohlfing, Charles G., 3803 Russell Ave.
Rohlfing, Henry A. L., 2602 Laclede Ave
Rohlfing, Louis C., 3521 Dodier St.
Rosebrough, Frank H., 928 N. Grand Ave.
Rothman, Paul N., 1446 N. 11th St.
Rothstein, Hugo N., 3309 S. 13th St.
Rotter, Charles E., 1910 Arsenal St.
Royston, Grandison D., 611 N. Jefferson Ave.
Ruddell, George W., 926 Academy Ave.
Rule, John B., Olivia Bldg.
Rumbold Frank M., Jefferson City, Mo.
Rush, William H., 3540 Washington Ave.
Rusk, Elizabeth M., 4241 Delmar Ave.
Russler, Jacob J., 2620 S. Jefferson Ave
Sahlender, Otto L., 321 N. Grand Ave.
Sale, Llewellyn, Humboldt Bldg.
Salter, John C., 3634 Washington Ave.
Sante, August H., 3141 Laclede Ave.
Sanperl, Harry, 465 N. Taylor Ave.
Sauer, Willam E., Humboldt Bldg.
Saunders, Edward W., 3003 Lafayette Ave.
Saxl, Ernst, 212 Metropolitan Bldg.
Say, William J., 14 Thornby Pl.
Schaub, Charles W., 2302 Salisbury St.
Schery, Charles W., 917 Allen St.
Scheele, Matthias H., Lister Bldg.
Schisler, Edwin J., Jefferson & Russell Aves.
Schlossstein, Adolph G., 3153 Longfellow Ave.
Schlueter, Robert E., 909 Park Ave.
Schmallhorst, Daniel E., 8212 N. Broadway.
Schmidt, William Carl, 2417 S. Broadway.
Scholz, Paul C., 3203 Franklin Ave.
Scholz, Phillip, 3803 N. 14th St.
Scholz, Roy P., 619 Metropolitan Bldg.
Schuchat, W. Louis, 2200 Chouteau Ave.
Schulte, Francis A., 3626 North Market St.
Schulz, Edward, 1716 S. 7th St.
Schulz, Henry W., 2603 Cherokee St.
Schwab, Sidney I., Humboldt Bldg.
Schwarz, Henry, 440 N. Newstead Ave.
Schwarze, August, 2921 S. Jefferson Ave.
Scott, Clive D., 356 Century Bldg.
Scott, Elijah A., 1700A S. Broadway.
Scott, James M., 3313 Morgan St.
Seelig, Major G., Humboldt Bldg.
Semple, Nathaniel M., Humboldt Bldg
Senseney, Eugene T., Lister Bldg.
Shankland, J. Wilbert, 21 Marina Bldg
Shanklin, Benjamin, 1514 S. Jefferson Ave.
Shapleigh, John P., Humboldt Bldg.
Sharpe, Norvelle Wallace, 3520 Lucas Ave.
Shattinger, Charles, 2924 S. Grand Ave.
Sheahan, Edwin L., 3637 Finney Ave.
Sheets, Martin E., 4359 Chouteau Ave.
Shoemaker, John F., 1006 Carleton Bldg.
Shoemaker, William A., 1006 Carleton Bldg.
Shutt, Cleveland H., City Hospital.
Sieving, Gustav W., 3601 S. Jefferson Ave
Sieving, Henry J. C., 1125 St. Louis Ave.
Simon, Frederick C., 1835 Cass Ave.
Singer, Jacob J., 212 Ozark Bldg.
Skrainka, Philip, 603 Metropolitan Bldg.
Sluder, Greenfield, 3542 Washington Ave
Smith, Carroll, Humboldt Bldg.
Smith, Ellsworth, Jr., Humboldt Bldg.
Smith, John Campbell, Humboldt Bldg.
Smith, J. Atkinson, 4130 St. Louis Ave
Soper, Horace W., 626 Metropolitan Bldg.
Spain, Kate C., 700 Carleton Bldg.
Spencer, Horatio N., 2723 Washington Ave.
Spencer, Selden, 2723 Washington Ave.
Spinzig, Felix, 937 Park Ave.
Spitze, Edward C., 311 Metropolitan Bldg.
Staats, V. Cecil, Lister Bldg.
Stauffer, William H., Humboldt Bldg.
Steedman, Isaiah G. W., 4200 Washington Ave.
Steele, Aaron J., 5871 Maple Ave.
Steiner, Albert S., 1507 Destrehan St.
Stevens, Charles D., 1749 S. Grand Ave.
Stewart, Floyd, 1524 Chemical Bldg.
Stewart, James, 4740 Washington Blvd.
Stewart, John, 4909 St. Louis Ave.
Stocking, Lyman C., 1304 Academy Ave
Stockwell, Benjamin E., 2345 S. Broadway.
Straus, Leon, 805 N. Grand Ave.
Streutker, Charles E. F., 3828 S. Broadway.
Sturhahn, Ferdinand O., 3519 Hebert St
Suggett, Orril L., 423 Commercial Bldg.
Summa, Henry H., 5703 Florissant Ave.
Summa, Hugo, 410 Metropolitan Bldg.
Sutter, John H., 3208 N. 19th St.
Sutter, Otto, 355 Century Bldg.
Swahlen, Percy H., 415 Metropolitan Bldg
Tabacnic, Maxwell, 2903 Thomas St.
Talbott, Hudson, 426 Metropolitan Bldg.
Tanquary, James H., 930 Belt Ave.

Taussig, Albert E., 3519 Washington Ave.
Taussig, Frederick J., 727 Metropolitan Bldg.
Temm, Louis N., 3516 N. Market St.
Terry, Robert J. ,1806 Locust St.
Thierry, Charles W., 501 Metropolitan Bldg.
Thompson, Ralph L., 1402 S. Grand Ave.
Thumser, Larenz, 1808 Victor St.
Thurmon, E. J., 2805 S. Kingshighway.
Thurmon, Josiah D., 6758 Page Ave.
Tiedemann, Ernest F., 3635 Cleveland Av.
Todd, D. Clay, 1231 N. Taylor Ave.
Tooker, Charles W., 416 Metropolitan Bldg.
Torrance, Loyal B., Deaconess Hospital.
Tuholske, Herman, 465 N. Taylor Ave.
Tuholske, Moritz C., 4104A Easton Ave.
Tupper, Paul Y., Linmar Bldg.
Tuttle, George M., 4519 Washington Ave.
Ude, Waldemar, 3546 Gravois Ave.
Urban, Emanuel T., 3156 Park Ave.
Van Hoefen, Samuel, 8408 Hall's Ferry Rd.
Van Hoefen, Siegfried A., 8313 Hall's Ferry Rd.
Valle, Jules F., 4955 Maryland Ave.
Vasterling, Paul F., Mo. Pacific Hospital.
Vaughan, John W., Euclid & Washington Aves.
Viedt, Edward J., 6901 S. Broadway.
Vinyard, Paul, 3901 Park Ave.
Vitt, Rudolph S., 3924 S. Broadway.
Vogler, Alfred T., 1523 Penrose St.
Vogt, Gustav W., 4977 Lotus Ave.
Vogt, William H., 723 Metropolitan Bldg.
Von der Au, Otto L., 2306 S. 13th St.
Vosburgh, Charles A., 518 Metropolitan Bldg.
Wagers, Arthur J., 3673 W. Pine Blvd.
Wall, Otta A., 4532 Virginia Ave.
Wall, Otto A., Jr., 3122 S. Grand Ave.
Walson, Charles M., 3883 Hartford St.
Ward, Edgar P., 2831 Shenandoah Ave.
Webb, William, 5575 Delmar Ave.
Weinsberg, Charles H., 1531 S. 11th St.
Weisberg, Julius H., 2015 Russell Ave.
Weiss, William, Mo. Pacific Hospital.
Weiterer, Herman L., 2728 N. 11th St.
Wenger, Oliver C., 2202 S. Broadway.
Wesseler, Frederick W., 2819 S. 13th St.
Westbrook, George W., 3605 Lindell Blvd.
Westerman, Clarence M., 1343 Syndicate Trust Bldg.
Whelpley, Henry M., 2342 Albion Pl.
White, Charles A., 420 Holland Bldg.
Wichmann, Herman L., 3229 S. Jefferson Ave.
Wiener, Meyer, 500 Carleton Bldg.
Wild, Frank, 3600 N. 14th St.
Wilkes, Benjamin, 720 Metropolitan Bldg
Williams, Abram D., Hotel Deckard, Bedford, Ind.
Williamson, J. William, Roswell, N. Mex.
Williamson, Llewellyn, 611 Metropolitan Bldg.
Wilson, Allen, 1514 Wagoner Pl.
Wilson, Alvah M., Humboldt Bldg.
Wilson, Charles A., 635 Century Bldg.
Wilson, Robert E., 818 3d Nat. Bank Bldg
Winter, William O., 3630 S. Broadway.
Wobus, Reinhard E., 1105 Salisbury St
Wolf, Alexander E., 4500 Olive St.
Wolter, Otto L., 1446 Blair Ave.
Wood, William E., 403 Century Bldg.
Woodruff, Frederick E., 2925 Washington Ave.
Woolsey, Ross A., Frisco Hospital.
Wyche, Charles, Humboldt Bldg.
Yost, Walter B., 5308 Vernon Ave.
Young, Anthony O., Vanol Bldg.
Young, Henry McClure, City Hospital.
Youngman, J. Andrew, 5817 Gravois Ave.
Zahorsky, John, 1460 S. Grand Ave.

SCHUYLER COUNTY.

Bridges, J. B., Downing, Mo.
Drake, A. J., Downing, Mo.
Gerwig, H. E., Downing, Mo.
Keller, J. H., Glenwood, Mo.
Mitchell, E. J., Lancaster, Mo.
Zeber, W. H., Queen City, Mo.

SCOTLAND COUNTY.

Alexander, W. E., Memphis, Mo.
Baker, P. M., Arbela, Mo.
Bondurant, W. E. H., Memphis, Mo.
Foster, F. G., Memphis, Mo.
Parrish, E. E., Memphis, Mo.
Pile, O. F., Memphis, Mo.
Platter, A. E., Memphis, Mo.

SCOTT COUNTY.

Atkisson, J. A., Morehouse, Mo.
Blockledge, H. T., Commerce, Mo.
Cannon, G. S., Fornfelt, Mo.
Cline, J. A., Vanduser, Mo.
Frazer, T. F., Commerce, Mo.
Frazer, T. R., Commerce, Mo.
Harris, W. E., Oran, Mo.
Haw, U. P., Benton, Mo.
Hutton, W. S., Fornfelt, Mo.
McCabe, R. S., Chaffee, Mo.
Malcolm, P. M., Sikeston, Mo.
Mayfield, L. S., Illmo, Mo.
Milem, J. A., Sikeston, Mo.
Ogilvie, Fred, Blodgett, Mo.
Rodenmeyer, Henry, Kelso, Mo.
Sparks, R. A., Blodgett, Mo.
Tate, P. S., Morely, Mo.
Valle, Jules F., 4955 Maryland Ave.
Wade, S. J., Benton, Mo.
Wescott, W. H., Oran, Mo.

SHELBY COUNTY.

Carson, William, Shelbyville, Mo.
Chapman, Charles, Shelbina, Mo.
Dallas, L. W., Hunnewell, Mo.
Daniel, J. R., Clarence, Mo.
Delaney, G., Emden, Mo.
Dobson, D. A., Hunnewell, Mo.
Ferguson, A. D., Hunnewell, Mo.
Nickell, L. O., Clarence, Mo.
Owen, William, Shelbina, Mo.
Pollard, H. M., Shelbina, Mo.
Read, N. M., Clarence, Mo.
Roy, F. K., Clarence, Mo.
Sanders, W. S., Clarence, Mo.
Singleton, D. E., Fulton, Mo.
Smith, J. D., Shelbina, Mo.
Smith, L. L., Bethel, Mo.
Stark, E. B., Hagers Grove, Mo.
Vaughn, H. C., Shelbina, Mo.
White, A. T., Lakenan, Mo.
Willis, H. T., Shelbina, Mo.
Wood, A. G., Lentner, Mo.
Wood, A. M., Lentner, Mo.

STODDARD COUNTY.

Allen, T. G., Bernie, Mo.
Ashley, John, Bloomfield, Mo.
Brandon, J. P., Essex, Mo.
Caldwell, W. C., Essex, Mo.
Cline, B. J., Essex, Mo.
Douglass, J. H., Dexter, Mo.
Ford, W. J., Leora, Mo.
Huggins, U. L., Frisco, Mo.
Kerr, W. B., Dudley, Mo.
La Rue, H., Dexter, Mo.
Slaughter, J. L., Dexter, Mo.
Tiller, J. A., Bloomfield, Mo.

Vernon, George W., Dexter, Mo.
Walters, Charles, Dexter, Mo.
West, Samuel, Idalia, Mo.

SULLIVAN COUNTY.

Garner, R. L., Pollock, Mo.
Herrington, Warner, Green City, Mo.
Montgomery, J. S., Milan, Mo.
Polle, A. R., Milan, Mo.
Porter, E. S., Milan, Mo.
Reid, Ed. W., Humphreys, Mo.
Roberts, I. M., Green City, Mo.
Roberts, J. C., Boynton, Mo.
Shriver, C. F., Harris, Mo.
Weidner, A., Newton, Mo.
Wilson, C. S., Des Moines, Iowa.
Witter, W. L. M., Milan, Mo.

TANEY COUNTY.

Baldwin, F. V., Forsyth, Mo.
Burdett, G. W., Branson, Mo.
Humphreys, T. H., Kissee Mills, Mo.
Irwin, R. M., Gretna, Mo.
McIntyre, Elizabeth, Branson, Mo.
Mitchell, Guy S., Forsyth, Mo.

VERNON COUNTY.

Adams, W. T., Richards, Mo.
Altham, A. G., Metz, Mo.
Ammerman, I. W., Nevada, Mo.
Anderson, Finis L., Nevada, Mo.
Bohannon, W. T., Nevada, Mo.
Buchanan, J. Robert, Nevada, Mo.
Callaway, L. H., Nevada, Mo.
Chambers, J. C., Schell City, Mo.
Churchell, E. R., Nevada, Mo.
Colson, J. R., Schell City, Mo.
Craig, T. B., Nevada, Mo.
Davis, C. B., Walker, Mo.
Dulin, E. A., Nevada, Mo.
Farrington, O. P., Moundville, Mo.
Henderson, R. C., Stotesbury, Mo.
Jarvis, H. C., Schell City, Mo.
Meade, Samuel T., Nevada, Mo.
Moore, C. H., Walker, Mo.
Musser, C. W., Horton, Mo.
Popplewell, W. H., Sheldon, Mo.
Primm, W. B., Deerfield, Mo.
Robinson, J. F., Nevada, Mo.
Royston, W. P., Harwood, Mo.
Truex, J. L., Milo, Mo.
Williams, V. O., Nevada, Mo.
Wilson, G. C., Nevada, Mo.
Yater, J. M., Nevada, Mo.

WEBSTER COUNTY.

Atkins, W. A., Rogersville, Mo.
Bailey, E. M., Elkland, Mo.
Beatie, W. R., Marshfield, Mo.
Bollinger, W. H., Seymour, Mo.
Bruce, John R., Marshfield, Mo.
Bruton, T. S., Seymour, Mo.
Cantwell, B. T., Rogersville, Mo.
Good, J. W., Fordland, Mo.
Highful, M., Marshfield, Mo.
James, E. F., Marshfield, Mo.
McHaffie, C. H., Rogersville, Mo.
Mott, J. R., Grovespring, Mo.
Rabenau, W. J., Fordland, Mo.
Summers, W. R., Niangua, Mo.
Trimble, Eli, Seymour, Mo.
Williams, D. A., Niangua, Mo.
Williams, S. O. H., Fordland, Mo.

WORTH COUNTY.

Andrews, John, Grant City, Mo.
Dove, J. D. F., Allendale, Mo.
Forbis, C. F., Denver, Mo.
Mills, O. P. M., Grant City, Mo.
Phipps, J. K., Grant City, Mo.
Robertson, W. A., Allendale, Mo.